

# **Helping South Dakotans Become Informed Health Care Consumers: South Dakota's Hospital Pricing Report, 2006**



**South Dakota Department of Health  
June 2007**



# **Helping South Dakotans Become Informed Health Care Consumers: South Dakota's Hospital Pricing Report, 2006**

**Doneen Hollingsworth, Secretary  
South Dakota Department of Health**

**Office of Data, Statistics, and Vital Records  
South Dakota Department of Health  
600 East Capitol Avenue  
Pierre, South Dakota**

**Telephone: (605) 773-3361  
June 2007**



# *Preface*

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## **Overview**

Helping South Dakotans Become Informed Health Care Consumers: South Dakota's Hospital Pricing Report, 2006 is a publication that was developed in accordance with South Dakota Codified Laws (SDCL) 34-12E-11 through 34-12E-13 and South Dakota Administrative Rules § 44:66. The report serves as a way for health care consumers to research a hospital's 25 most common inpatient diagnosis-related groups (DRG). A DRG is a classification assigned to an inpatient hospital service claim based on the patient's age and sex, the principal and secondary diagnoses, the procedures performed, and the discharge status.

The information used to develop the report came from the Health Care Financing Administration (HCFA) Uniform Bill-92 (UB-92) form. The UB-92 is a standardized form from the HCFA used to electronically submit claims for health care received in an institutional setting to payers.

The South Dakota Department of Health (SDDOH) contracts with the South Dakota Association of Healthcare Organizations (SDAHO) to gather and analyze the UB-92 forms for each facility. Once analyzed, the data is provided to SDDOH for placement on the website and in this report.

## **History**

The language of SB169 was a recommendation that came from the South Dakota Health Care Commission, which was established in 2003. SB169 was passed during the 2005 Legislative Session creating SDCL 34-12E-11 through 34-12E-13. Shortly after the South Dakota Administrative Rules § 44:66 were developed.

## **Purpose of the Report**

This report provides by hospital the median charge for the top 25 DRGs where there were more than 10 occurrences. This report contains hospital charge data from January 1, 2006 to December 31, 2006. A median charge is defined as the charge representative of the amount where half of patients were charged more and half of patients were charged less.

In instances where a hospital does not have 25 DRGs with at least 10 or more cases, the hospital reports all DRGs that have at least 10 cases. In instances where a hospital has more than one DRG in the 25<sup>th</sup> rank, the hospital shall report each DRG falling into the 25<sup>th</sup> rank.

## **Description of Report**

The report is hospital-specific for the 25 most common inpatient DRGs along with case severity rating, the weighted numeric value reflecting average resource consumption by patients in hospital for its DRGs over a particular period of time, the volume of discharges for each DRG, the rank of each DRG, and the median charge for each DRG.

## **Contact Information**

Any questions regarding Helping South Dakotans Become Informed Health Care Consumers: South Dakota's Hospital Pricing Report, 2006 should be addressed to:

Office of Data, Statistics, and Vital Records  
600 East Capitol  
Pierre, SD 57501-2536  
Phone: (605) 773-3361

Hospital pricing information is also available on the internet at  
<http://hospitalpricing.sd.gov>.

The following people were the main contributors to the development of this report:

Barb Buhler	Public Information Officer
Kevin DeWald	HIPAA Compliance Officer
Kim Carlson	Policy Analyst
Kathlene Mueller	Administrator, Office of Data, Statistics, and Vital Records

The Department of Health would also like to thank the following people for making this report possible:

Ken Senger	South Dakota Association of Health Care Organizations
Gilbert Johnson	South Dakota Association of Health Care Organizations
Molly Guiterez	South Dakota Association of Specialty Care Providers
Kyle Goldhammer	South Dakota Association of Specialty Care Providers
Thomas Dempster	Senator, District 9

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# **Consumer Information**



## *Consumer Information*

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### **Becoming an Informed Health Care Consumer**

Health care consumers can become better informed by doing a number of things.

- Adopt healthy behaviors and visit their doctor regularly.
- Follow doctor's instructions about life style issues such as diet and exercise.
- Learn about health insurance plan or medical benefits before they need them.
- Know the hospital; however remember many factors will affect a hospital's charges and utilization rates. Such factors include the availability of physicians and staff and the level of care or specialization of services offered.
- Understand the charges; however, charges shown in this report are different from costs, reimbursement, price, or payment.

Many factors will affect costs for a hospital stay including whether the health care consumer has insurance, the type of insurance, and the billing procedures at a given hospital. The amount collected by a hospital is almost always less than the charges. Three common examples are:

- Government programs such as Medicare and Medicaid pay hospitals much less than billed charges. These payments are determined by the government agencies and hospitals have no ability to negotiate reimbursement rates.

- Commercial insurers or other purchasers of health care services usually negotiate discounts with hospitals on behalf of the patients they represent.
- Many hospitals typically have policies that allow low-income persons to receive reduced-charge, free, or charity care.

Health care consumers should also keep in mind that it is always best to ask your hospital if you have questions about specific health care needs and what the charges might be for services.

### **Consumer Guide to Hospital Charges**

The amount a hospital bills for a patient's care is known as the charge. This is not the same as the actual cost nor the amount paid for the care. This report lists the median charges billed by hospitals for their most common DRGs.

The DRG is the basic unit of analysis for inpatient hospitalization. The federal government established DRGs as a way to pay hospitals for the care of Medicare patients; many payers now use DRGs. Each DRG has a numeric weight or case severity rating reflecting the national average hospital resource consumption by patients for that DRG compared to the national average resource consumption of all patients.

The median charges for DRGs are derived from a standardized billing form, which lists the actual charges for each patient. The amount actually collected by a hospital (the amount paid) for each DRG is almost always less than the listed charge.

Charges are used almost universally to measure the relative costs of health care. While each hospital's charge structure may vary in important ways, charges represent a consistent, though imperfect, way to compare health care costs.

There are many reasons why charges may differ between hospitals. Generally, charges vary because no two patients are alike. Their conditions, reactions to medications or treatment, physician practices, or time of recovery will all impact the charge for care. Some of the more common reasons charges vary fall into the categories of patient variations and hospital variations.

### Patient Variations

- ***Severity of illness and intensity of care*** – Some hospitals care for more severely ill patients than others. Patients with the same diagnosis may have complications, more than one disorder or disease occurring at the same time, or other related difficulties and may need very different levels of service and staff attention, causing variation in charges. Hospitals that treat more severely ill patients are expected to have higher case severity ratings, longer lengths of stay, and higher charges.
- ***Length of hospital stay*** - Longer hospital stays are likely to result in higher charges. Some patients, especially severely ill patients, may not respond as well to treatment or surgery and, therefore, may have to stay in the hospital longer. Other factors, such as older patients who require more services or who have more chronic or multiple conditions, also will require longer hospital stays.
- ***Emergency admissions*** - Hospitals with no emergency services will likely have lower charges.

One-third or more of hospital patients come through the emergency room. The costs of emergency services are included in patient charges.

- ***Physician practice and treatment*** – Individual physician judgment based on patient needs influences treatment decisions. The kinds of diagnostic tests ordered or preferred treatments also vary somewhat from physician to physician and influence hospital charges.
- ***Physician specialty*** – Because the education, training, and experience of each physician can vary significantly, a physician may involve other physicians in consulting roles. In these situations hospital charges can be generated by more than one physician for the same patient.

### Hospital Variations

- ***Professional fees*** – Physician charges, including those of surgeons and anesthesiologists, are normally separate from hospital charges. The hospital charges listed in this report do **not** include such professional fees. The hospital charges may or may not include laboratory work, x-rays, and other professional services performed in conjunction with the diagnosis and service provided. The decision to include these services in the hospital charge varies by hospitals.
- ***Payer mix and cross subsidization*** – Charges vary among hospitals because of cross subsidization, which is used to help fund care for government-paid patients (such as Medicare, Medicaid, county poor relief) and the underinsured and uninsured where payments do not cover the costs to provide care. Cross subsidization, or cost shifting, means that

charges also reflect an amount to help pay for the uncompensated care provided by the hospital to government-program patients and to indigent patients. The amount that needs to be subsidized or charged will vary from hospital to hospital. Hospitals that have a relatively high percentage of government-program patients, such as nonprofit hospitals or those in rural communities where patients may have less employer-sponsored health coverage, are forced to recover a greater percentage of their operational costs from privately insured and self-pay patients through higher charges.

- **New technology** – The equipment hospitals use to provide services differs in age, sophistication, and frequency of use. Hospitals with the latest technology may have higher charges than those with older, less sophisticated equipment.
- **Staffing costs** – Salary costs differ by region and are typically higher in urban than rural areas. Shortages of nurses and other medical personnel affect regions differently. Where shortages are more severe, the competitive staffing costs may be higher, resulting in higher charges.
- **Types and range of services** – Hospitals often offer different levels of care and specialize in one or more types of services. For instance, a hospital may specialize in heart procedures or psychiatric care, and may show higher median charges than other hospitals for these services because of the expense involved in treating severe cases. Also, hospitals differ in the range of services they provide to patients. Some may provide the full range of services required for diagnosis and treatment during the stay. Others may

stabilize patients and then transfer them to another hospital for more specialized care.

- **Service frequency** – The per-patient cost of services is generally higher if the type of hospitalization occurs infrequently at the hospital. Infrequently used services may cost more than services that are used more frequently.
- **Hospital cost structures** – Hospitals differ in their operational costs. Some hospitals try to spread the cost of all services and equipment among all patients. Others establish charges for specific services based on the cost to provide each specific service. Furthermore, some hospitals may decide to provide certain services at a loss while other hospital operations subsidize the losses. Any of these situations can result in significantly different charges among hospitals for a given diagnosis or type of service.
- **Capital expenses** – Hospitals differ in the amount of debt and depreciation they must cover in their charge structure. A hospital with a heavy debt load, a new building, or major renovation to pay back may have higher charges than a hospital without such expenses. Furthermore, hospitals may choose to lease or purchase equipment or facilities. The choices made about financing of capital projects may affect charges in different ways.



# Hospital Charge Data



## South Dakota

<b>DRG</b>	<b>DRG Description</b>	<b>Case Severity Rating</b>	<b>Discharges</b>	<b>Rank</b>	<b>Median Charge</b>
391	Normal Newborn	0.1564	9,035	1	\$ 1,934.01
373	Uncomplicated Vaginal Delivery	0.3911	7,003	2	\$ 4,840.20
544	Major Joint Replacement or Reattachment of Lower Extremity	1.9878	4,359	3	\$ 28,669.09
430	Psychoses	0.7261	3,343	4	\$ 6,007.52
89	Pneumonia, Adult, Complicated	1.0376	2,942	5	\$ 8,807.82
371	Uncomplicated Cesarean Section	0.6565	2,404	6	\$ 9,763.87
127	Heart Failure and Shock	1.049	1,968	7	\$ 9,786.93
182	Digestive Disorders, Adult, Complicated	0.7853	1,931	8	\$ 7,636.66
359	Hysterectomy and Ovarian Procedures	0.8053	1,776	9	\$ 13,712.71
462	Rehabilitation	0.946	1,555	10	\$ 16,925.24
88	Chronic Obstructive Pulmonary Disease	0.8878	1,541	11	\$ 8,950.30
390	Newborn with Significant Problems	1.1551	1,265	12	\$ 2,632.42
426	Depression	0.5122	1,176	13	\$ 4,408.57
174	Stomach and Intestinal Bleeding, Complicated	1.0296	1,110	14	\$ 10,224.41
14	Stroke	1.2118	1,081	15	\$ 11,985.77
558	Implant of Drug Coated Stent, without Major Cardiovascular Diagnosis	2.0814	1,020	16	\$ 24,201.25
372	Vaginal Delivery, Complicated	0.566	992	17	\$ 5,839.41
138	Abnormal Heart Beat, Complicated	0.8365	886	18	\$ 8,447.63
243	Medical Back Problems	0.797	865	19	\$ 8,716.02
143	Chest Pain	0.5637	838	20	\$ 6,617.38
320	Kidney and Urinary Tract Infections, Adult, Complicated	0.8769	825	21	\$ 7,299.94
498	Spinal Fusion, Uncomplicated	2.9896	791	22	\$ 48,661.50
91	Pneumonia, Adolescent	0.5598	784	23	\$ 5,677.62
296	Disorders related to Metabolism, Adult	0.8334	781	24	\$ 7,016.50
557	Implant of Drug Coated Stent with Major Cardiovascular Diagnosis	2.7616	773	25	\$ 33,284.19

Note: Case Severity Rating equals CMS Version 24 numeric weights. The following DRG codes expired on October 1, 2006 DRG 20, 24, 25, 148, 154, 415, 416, and 475 for these DRGs the case severity rating equals CMS Version 23 numeric weights.

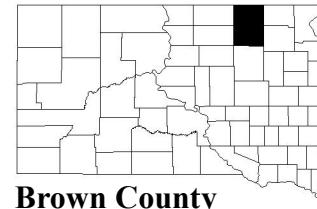
Source: SDAHO Dimensions Program January-December 2006; Iowa Hospital Association and 3M Medicare Grouper Version 23 & 24 (Federal Fiscal Year October 1 thru September 30).

**Aberdeen: Avera St. Luke's**

[www.averastlukes.org](http://www.averastlukes.org)

**Billing Contact: Geoff Durst (605) 622-5230**

**CY2006**



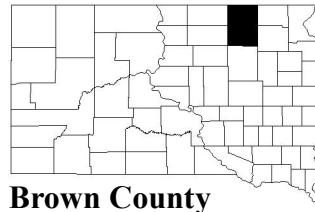
**Brown County**

<b>DRG</b>	<b>DRG Description</b>	<b>Case Severity</b>			
		<b>Rating</b>	<b>Discharges</b>	<b>Rank</b>	<b>Median Charge</b>
391	Normal Newborn	0.1564	514	1	\$ 1,718.60
373	Uncomplicated Vaginal Delivery	0.3911	465	2	\$ 4,890.05
430	Psychoses	0.7261	242	3	\$ 4,690.44
462	Rehabilitation	0.946	203	4	\$ 15,541.17
544	Major Joint Replacement or Reattachment of Lower Extremity	1.9878	195	5	\$ 24,910.68
89	Pneumonia, Adult, Complicated	1.0376	189	6	\$ 11,815.24
371	Uncomplicated Cesarean Section	0.6565	170	7	\$ 11,666.65
390	Newborn with Significant Problems	1.1551	150	8	\$ 2,096.22
127	Heart Failure and Shock	1.049	146	9	\$ 10,604.38
359	Hysterectomy and Ovarian Procedures	0.8053	122	10	\$ 13,971.84
523	Substance Abuse, Uncomplicated, without Rehabilitation	0.4196	121	11	\$ 3,401.76
88	Chronic Obstructive Pulmonary Disease	0.8878	111	12	\$ 11,773.18
14	Stroke	1.2118	84	13	\$ 12,342.93
182	Digestive Disorders, Adult, Complicated	0.7853	84	13	\$ 8,922.50
174	Stomach and Intestinal Bleeding, Complicated	1.0296	77	15	\$ 10,211.90
210	Hip Operations except Replacement, Adult, Complicated	1.9022	75	16	\$ 21,453.70
138	Abnormal Heart Beat, Complicated	0.8365	63	17	\$ 11,968.84
148	Major Small and Large Bowel Procedures, Complicated	3.4479	60	18	\$ 34,802.68
521	Alcohol/Drug Abuse or Dependence, Complicated	0.7338	60	18	\$ 4,953.77
79	Lung Infection, Complicated	1.6268	46	20	\$ 21,175.22
372	Vaginal Delivery, Complicated	0.566	46	20	\$ 5,680.06
204	Pancreatic Disorders, except Cancer	1.0989	45	22	\$ 11,247.49
124	Circulatory Disorders, except Heart Attack	1.4099	44	23	\$ 17,741.91
121	Circulatory Disorders with Heart Attack	1.6166	42	24	\$ 17,096.39
243	Medical Back Problems	0.797	41	25	\$ 11,284.24

Note: Case Severity Rating equals CMS Version 24 numeric weights. The following DRG codes expired on October 1, 2006 DRG 20, 24, 25, 148, 154, 415, 416, and 475 for these DRGs the case severity rating equals CMS Version 23 numeric weights.

Source: SDAHO Dimensions Program January-December 2006; Iowa Hospital Association and 3M Medicare Grouper Version 23 & 24 (Federal Fiscal Year October 1 thru September 30).

**Aberdeen: Dakota Plains Surgical Center  
CY2006**



DRG	DRG Description	Case Severity		Rank	Median Charge
		Rating	Discharges		
544	Major Joint Replacement or Reattachment of Lower Extremity	1.9878	213	1	\$ 21,996.13
500	Back and Neck Procedure except Spinal Fusion, Uncomplicated	0.9223	20	2	\$ 11,284.50
503	Knee Procedures without Principal Diagnosis of Infection	1.245	16	3	\$ 13,734.88
498	Spinal Fusion, Uncomplicated	2.9896	15	4	\$ 33,036.50
219	Lower Extrem & Humer Procedure except Hip, Foot, Femur Adult, Uncomplicated	1.1033	13	5	\$ 7,857.05
224	Shoulder, Elbow or Forearm Procedures, except Major Joint Procedures, Uncomplicated	0.8574	10	6	\$ 8,596.00

Note: Hospitals are only required to report the top 25 DRGs with at least 10 cases reported. In 2006, only the above listed DRGs had at least 10 cases reported at this hospital. (ARSD 44:66:02:01).

Case Severity Rating equals CMS Version 24 numeric weights. The following DRG codes expired on October 1, 2006 DRG 20, 24, 25, 148, 154, 415, 416, and 475 for these DRGs the case severity rating equals CMS Version 23 numeric weights.

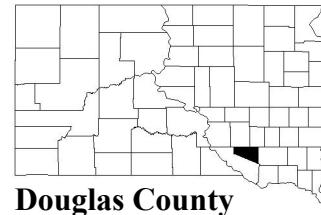
Source: SDAHO Dimensions Program January-December 2006; Iowa Hospital Association and 3M Medicare Grouper Version 23 & 24 (Federal Fiscal Year October 1 thru September 30).

**Armour: Douglas County Memorial Hospital**

[www.dcmhsd.org](http://www.dcmhsd.org)

**Billing Contact: Patty Weatherford (605) 724-2159**

**CY2006**



**Douglas County**

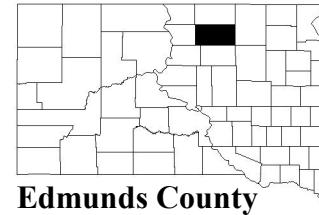
DRG	DRG Description	Case Severity			
		Rating	Discharges	Rank	Median Charge
89	Pneumonia, Adult, Complicated	1.0376	19	1	\$ 8,101.14
138	Abnormal Heart Beat, Complicated	0.8365	16	2	\$ 5,760.65
127	Heart Failure and Shock	1.049	14	3	\$ 7,477.01
391	Normal Newborn	0.1564	14	3	\$ 843.75
88	Chronic Obstructive Pulmonary Disease	0.8878	11	5	\$ 6,487.67
182	Digestive Disorders, Adult, Complicated	0.7853	11	5	\$ 5,548.28
373	Uncomplicated Vaginal Delivery	0.3911	11	5	\$ 1,982.76

Note: Hospitals are only required to report the top 25 DRGs with at least 10 cases reported. In 2006, only the above listed DRGs had at least 10 cases reported at this hospital. (ARSD 44:66:02:01).

Case Severity Rating equals CMS Version 24 numeric weights. The following DRG codes expired on October 1, 2006 DRG 20, 24, 25, 148, 154, 415, 416, and 475 for these DRGs the case severity rating equals CMS Version 23 numeric weights.

Source: SDAHO Dimensions Program January-December 2006; Iowa Hospital Association and 3M Medicare Grouper Version 23 & 24 (Federal Fiscal Year October 1 thru September 30).

**Bowdle: Bowdle Hospital**  
[www.bowdlehealthcarecenter.com](http://www.bowdlehealthcarecenter.com)  
**CY2006**



<b>DRG</b>	<b>DRG Description</b>	<b>Case Severity</b>		<b>Discharges</b>	<b>Rank</b>	<b>Median Charge</b>
		<b>Rating</b>	<b>Rating</b>			
89	Pneumonia, Adult, Complicated	1.0376		12	1	\$ 5,933.60

Note: Hospitals are only required to report the top 25 DRGs with at least 10 cases reported. In 2006, only the above listed DRGs had at least 10 cases reported at this hospital. (ARSD 44:66:02:01).

Case Severity Rating equals CMS Version 24 numeric weights. The following DRG codes expired on October 1, 2006 DRG 20, 24, 25, 148, 154, 415, 416, and 475 for these DRGs the case severity rating equals CMS Version 23 numeric weights.

Source: SDAHO Dimensions Program January-December 2006; Iowa Hospital Association and 3M Medicare Grouper Version 23 & 24 (Federal Fiscal Year October 1 thru September 30).

**Britton: Marshall County Healthcare Center**  
**CY2006**



DRG	DRG Description	Case Severity			
		Rating	Discharges	Rank	Median Charge
88	Chronic Obstructive Pulmonary Disease	0.8878	18	1	\$ 8,570.07
143	Chest Pain	0.5637	15	2	\$ 3,030.90
320	Kidney and Urinary Tract Infections, Adult, Complicated	0.8769	15	2	\$ 6,506.58
65	Dysequilibrium, Dizziness	0.6159	12	4	\$ 5,255.97
174	Stomach and Intestinal Bleeding, Complicated	1.0296	12	4	\$ 7,886.82
182	Digestive Disorders, Adult, Complicated	0.7853	12	4	\$ 6,841.59
14	Stroke	1.2118	11	7	\$ 5,833.17
127	Heart Failure and Shock	1.049	11	7	\$ 8,326.58
89	Pneumonia, Adult, Complicated	1.0376	10	9	\$ 7,725.98
243	Medical Back Problems	0.797	10	9	\$ 5,419.41

Note: Hospitals are only required to report the top 25 DRGs with at least 10 cases reported. In 2006, only the above listed DRGs had at least 10 cases reported at this hospital. (ARSD 44:66:02:01).

Case Severity Rating equals CMS Version 24 numeric weights. The following DRG codes expired on October 1, 2006 DRG 20, 24, 25, 148, 154, 415, 416, and 475 for these DRGs the case severity rating equals CMS Version 23 numeric weights.

Source: SDAHO Dimensions Program January-December 2006; Iowa Hospital Association and 3M Medicare Grouper Version 23 & 24 (Federal Fiscal Year October 1 thru September 30).

**Brookings: Brookings Health System**  
[www.brookingshospital.org](http://www.brookingshospital.org)  
**Billing Contact: Rose Fedt (605) 696-7217**  
**CY2006**



<b>DRG</b>	<b>DRG Description</b>	<b>Case Severity</b>			
		<b>Rating</b>	<b>Discharges</b>	<b>Rank</b>	<b>Median Charge</b>
391	Normal Newborn	0.1564	205	1	\$ 2,052.72
373	Uncomplicated Vaginal Delivery	0.3911	167	2	\$ 4,425.38
89	Pneumonia, Adult, Complicated	1.0376	70	3	\$ 8,395.17
182	Digestive Disorders, Adult, Complicated	0.7853	42	4	\$ 6,569.98
544	Major Joint Replacement or Reattachment of Lower Extremity	1.9878	37	5	\$ 31,091.66
127	Heart Failure and Shock	1.049	32	6	\$ 7,453.89
372	Vaginal Delivery, Complicated	0.566	31	7	\$ 5,286.22
121	Circulatory Disorders with Heart Attack	1.6166	30	8	\$ 9,486.96
88	Chronic Obstructive Pulmonary Disease	0.8878	29	9	\$ 7,084.68
79	Lung Infection, Complicated	1.6268	25	10	\$ 9,858.99
174	Stomach and Intestinal Bleeding, Complicated	1.0296	22	11	\$ 7,255.27
296	Disorders related to Metabolism, Adult	0.8334	22	11	\$ 6,217.41
14	Stroke	1.2118	21	13	\$ 8,568.55
371	Uncomplicated Cesarean Section	0.6565	19	14	\$ 6,806.05
390	Newborn with Significant Problems	1.1551	18	15	\$ 2,762.42
180	Gastrointestinal Obstruction, Complicated	0.993	17	16	\$ 7,901.07
320	Kidney and Urinary Tract Infections, Adult, Complicated	0.8769	16	17	\$ 6,033.02
183	Digestive Disorders, Adult, Uncomplicated	0.5841	14	18	\$ 6,949.40
359	Hysterectomy and Ovarian Procedures	0.8053	14	18	\$ 8,265.30
278	Skin Infection, Adult, Uncomplicated	0.5649	13	20	\$ 4,281.61
184	Digestive Disorders, Adolescent	0.6192	12	21	\$ 3,314.10
90	Pneumonia, Adult, Uncomplicated	0.6148	11	22	\$ 5,591.54
96	Bronchitis and Asthma, Adult, Complicated	0.735	10	23	\$ 5,437.44
243	Medical Back Problems	0.797	10	23	\$ 6,326.74
298	Disorders related to Metabolism, Adolescent	0.5753	10	23	\$ 3,444.24
370	Cesarean Delivery, Complicated	0.9002	10	23	\$ 8,055.56
374	Normal Delivery with Tubal Ligation	0.6505	10	23	\$ 7,413.26

Note: Case Severity Rating equals CMS Version 24 numeric weights. The following DRG codes expired on October 1, 2006 DRG 20, 24, 25, 148, 154, 415, 416, and 475 for these DRGs  
the case severity rating equals CMS Version 23 numeric weights.

Source: SDAHO Dimensions Program January-December 2006; Iowa Hospital Association and 3M Medicare Grouper Version 23 & 24 (Federal Fiscal Year October 1 thru September 30).



**Burke: Community Memorial Hospital**  
**Billing Contact: Teri Wiedman (605) 775-2621**  
**CY2006**

DRG	DRG Description	Case Severity		Rank	Median Charge
		Rating	Discharges		
127	Heart Failure and Shock	1.049	13	1	\$ 4,324.19
296	Disorders related to Metabolism, Adult	0.8334	11	2	\$ 4,051.24

Note: Hospitals are only required to report the top 25 DRGs with at least 10 cases reported. In 2006, only the above listed DRGs had at least 10 cases reported at this hospital. (ARSD 44:66:02:01).

Case Severity Rating equals CMS Version 24 numeric weights. The following DRG codes expired on October 1, 2006 DRG 20, 24, 25, 148, 154, 415, 416, and 475 for these DRGs the case severity rating equals CMS Version 23 numeric weights.

Source: SDAHO Dimensions Program January-December 2006; Iowa Hospital Association and 3M Medicare Grouper Version 23 & 24 (Federal Fiscal Year October 1 thru September 30).

**Canton: Canton-Inwood Memorial Hospital**

[www.cantoninwoodhospital.org](http://www.cantoninwoodhospital.org)

**Billing Contact: Business Office Manager (605) 987-2621**

**CY2006**



**Lincoln County**

<b>DRG</b>	<b>DRG Description</b>	<b>Case Severity</b>			
		<b>Rating</b>	<b>Discharges</b>	<b>Rank</b>	<b>Median Charge</b>
89	Pneumonia, Adult, Complicated	1.0376	62	1	\$ 4,181.82
296	Disorders related to Metabolism, Adult	0.8334	19	2	\$ 4,454.45
127	Heart Failure and Shock	1.049	16	3	\$ 4,717.65
88	Chronic Obstructive Pulmonary Disease	0.8878	10	4	\$ 3,533.62
90	Pneumonia, Adult, Uncomplicated	0.6148	10	4	\$ 3,145.71

Note: Hospitals are only required to report the top 25 DRGs with at least 10 cases reported. In 2006, only the above listed DRGs had at least 10 cases reported at this hospital. (ARSD 44:66:02:01).

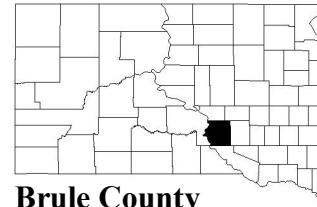
Case Severity Rating equals CMS Version 24 numeric weights. The following DRG codes expired on October 1, 2006 DRG 20, 24, 25, 148, 154, 415, 416, and 475 for these DRGs the case severity rating equals CMS Version 23 numeric weights.

Source: SDAHO Dimensions Program January-December 2006; Iowa Hospital Association and 3M Medicare Grouper Version 23 & 24 (Federal Fiscal Year October 1 thru September 30).

**Chamberlain: Mid-Dakota Medical Center**

[www.middakotamedicalcenter.org](http://www.middakotamedicalcenter.org)

CY2006



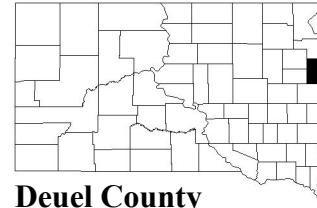
**Brule County**

<b>DRG</b>	<b>DRG Description</b>	<b>Case Severity</b>			
		<b>Rating</b>	<b>Discharges</b>	<b>Rank</b>	<b>Median Charge</b>
390	Newborn with Significant Problems	1.1551	52	1	\$ 1,831.77
89	Pneumonia, Adult, Complicated	1.0376	41	2	\$ 7,096.30
373	Uncomplicated Vaginal Delivery	0.3911	40	3	\$ 3,727.67
91	Pneumonia, Adolescent	0.5598	37	4	\$ 3,369.35
88	Chronic Obstructive Pulmonary Disease	0.8878	35	5	\$ 5,614.06
182	Digestive Disorders, Adult, Complicated	0.7853	29	6	\$ 4,027.17
372	Vaginal Delivery, Complicated	0.566	19	7	\$ 4,815.31
96	Bronchitis and Asthma, Adult, Complicated	0.735	18	8	\$ 5,389.18
143	Chest Pain	0.5637	15	9	\$ 2,026.76
391	Normal Newborn	0.1564	15	9	\$ 1,613.90
127	Heart Failure and Shock	1.049	13	11	\$ 6,139.48
416	Infection of the Blood, Adult	1.6774	12	12	\$ 6,507.00
98	Bronchitis and Asthma, Adolescent	0.587	11	13	\$ 3,634.05
277	Skin Infection, Adolescent, Complicated	0.8958	11	13	\$ 9,246.45
174	Stomach and Intestinal Bleeding, Complicated	1.0296	10	15	\$ 7,194.97

Note: Hospitals are only required to report the top 25 DRGs with at least 10 cases reported. In 2006, only the above listed DRGs had at least 10 cases reported at this hospital. (ARSD 44:66:02:01).

Case Severity Rating equals CMS Version 24 numeric weights. The following DRG codes expired on October 1, 2006 DRG 20, 24, 25, 148, 154, 415, 416, and 475 for these DRGs the case severity rating equals CMS Version 23 numeric weights.

Source: SDAHO Dimensions Program January-December 2006; Iowa Hospital Association and 3M Medicare Grouper Version 23 & 24 (Federal Fiscal Year October 1 thru September 30).

**Clear Lake: Deuel County Memorial Hospital**[www.deuelcountymemorial.org](http://www.deuelcountymemorial.org)**Billing Contact: Darla Toben (605) 874-3520****CY2006****Deuel County**

<b>DRG</b>	<b>DRG Description</b>	<b>Case Severity</b>			
		<b>Rating</b>	<b>Discharges</b>	<b>Rank</b>	<b>Median Charge</b>
89	Pneumonia, Adult, Complicated	1.0376	28	1	\$ 6,478.35
143	Chest Pain	0.5637	24	2	\$ 2,552.51
127	Heart Failure and Shock	1.049	14	3	\$ 6,631.59
88	Chronic Obstructive Pulmonary Disease	0.8878	12	4	\$ 5,911.75

Note: Hospitals are only required to report the top 25 DRGs with at least 10 cases reported. In 2006, only the above listed DRGs had at least 10 cases reported at this hospital. (ARSD 44:66:02:01).

Case Severity Rating equals CMS Version 24 numeric weights. The following DRG codes expired on October 1, 2006 DRG 20, 24, 25, 148, 154, 415, 416, and 475 for these DRGs the case severity rating equals CMS Version 23 numeric weights.

Source: SDAHO Dimensions Program January-December 2006; Iowa Hospital Association and 3M Medicare Grouper Version 23 & 24 (Federal Fiscal Year October 1 thru September 30).

**Custer: Custer Regional Hospital**  
[www.rcrc.org/Facilities/Hospitals/CusterCommunityHospital.asp](http://www.rcrc.org/Facilities/Hospitals/CusterCommunityHospital.asp)  
**Billing Contact: Patient Financial Services (605) 719-1740**  
**CY2006**



**Custer County**

<b>DRG</b>	<b>DRG Description</b>	<b>Case Severity</b>		<b>Rank</b>	<b>Median Charge</b>
		<b>Rating</b>	<b>Discharges</b>		
89	Pneumonia, Adult, Complicated	1.0376	16	1	\$ 6,781.36
182	Digestive Disorders, Adult, Complicated	0.7853	10	2	\$ 8,182.48

Note: Hospitals are only required to report the top 25 DRGs with at least 10 cases reported. In 2006, only the above listed DRGs had at least 10 cases reported at this hospital. (ARSD 44:66:02:01).

Case Severity Rating equals CMS Version 24 numeric weights. The following DRG codes expired on October 1, 2006 DRG 20, 24, 25, 148, 154, 415, 416, and 475 for these DRGs the case severity rating equals CMS Version 23 numeric weights.

Source: SDAHO Dimensions Program January-December 2006; Iowa Hospital Association and 3M Medicare Grouper Version 23 & 24 (Federal Fiscal Year October 1 thru September 30).



**Dakota Dunes: Siouxland Surgery Center, L.L.P.**

**CY2006**

<b>DRG</b>	<b>DRG Description</b>	<b>Case Severity</b>			
		<b>Rating</b>	<b>Discharges</b>	<b>Rank</b>	<b>Median Charge</b>
544	Major Joint Replacement or Reattachment of Lower Extremity	1.9878	301	1	\$ 22,363.00
498	Spinal Fusion, Uncomplicated	2.9896	143	2	\$ 50,004.75
359	Hysterectomy and Ovarian Procedures	0.8053	96	3	\$ 7,984.00
497	Spinal Fusion, Complicated	3.8192	44	4	\$ 60,000.23
520	Cervical Spinal Fusion, Uncomplicated	1.7569	38	5	\$ 32,375.38
500	Back and Neck Procedure except Spinal Fusion, Uncomplicated	0.9223	33	6	\$ 13,396.00
503	Knee Procedures without Principal Diagnosis of Infection	1.245	25	7	\$ 13,924.05
233	Other Musculoskeletal System and Connective Tissue O.R. Procedure, Complicated	1.9033	23	8	\$ 16,949.50
223	Major Shoulder/Elbow Procedure, or Other Upper Extremity Procedure, Complicated	1.1726	14	9	\$ 15,540.07
358	Hysterectomy and Ovarian Procedures, Complicated	1.1418	14	9	\$ 9,041.50
491	Major Joint and Limb Reattachment Procedures of Upper Extremity	1.7203	14	9	\$ 22,133.50
261	Breast Procedure for Non-Malignancy except Biopsy and Local Excision	0.9535	13	12	\$ 5,911.00
258	Total Mastectomy for Cancer, Uncomplicated	0.713	11	13	\$ 5,353.00
219	Lower Extrem & Humer Procedure except Hip, Foot, Femur Adult, Uncomplicated	1.1033	10	14	\$ 8,367.92
224	Shoulder, Elbow or Forearm Procedures, except Major Joint Procedures, Uncomplicated	0.8574	10	14	\$ 11,146.63
257	Total Mastectomy for Cancer, Complicated	0.9123	10	14	\$ 5,789.00

Note: Hospitals are only required to report the top 25 DRGs with at least 10 cases reported. In 2006, only the above listed DRGs had at least 10 cases reported at this hospital. (ARSD 44:66:02:01).

Case Severity Rating equals CMS Version 24 numeric weights. The following DRG codes expired on October 1, 2006 DRG 20, 24, 25, 148, 154, 415, 416, and 475 for these DRGs the case severity rating equals CMS Version 23 numeric weights.

Source: SDAHO Dimensions Program January-December 2006; Iowa Hospital Association and 3M Medicare Grouper Version 23 & 24 (Federal Fiscal Year October 1 thru September 30).

**De Smet: De Smet Memorial Hospital**  
**Billing Contact: Marcia Zwanziger (605) 353-6200**  
**CY2006**



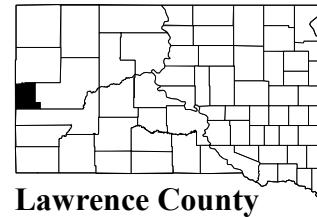
DRG	DRG Description	Case Severity		Rank	Median Charge
		Rating	Discharges		
89	Pneumonia, Adult, Complicated	1.0376	33	1	\$ 7,087.10
127	Heart Failure and Shock	1.049	12	2	\$ 5,989.05

Note: Hospitals are only required to report the top 25 DRGs with at least 10 cases reported. In 2006, only the above listed DRGs had at least 10 cases reported at this hospital. (ARSD 44:66:02:01).

Case Severity Rating equals CMS Version 24 numeric weights. The following DRG codes expired on October 1, 2006 DRG 20, 24, 25, 148, 154, 415, 416, and 475 for these DRGs the case severity rating equals CMS Version 23 numeric weights.

Source: SDAHO Dimensions Program January-December 2006; Iowa Hospital Association and 3M Medicare Grouper Version 23 & 24 (Federal Fiscal Year October 1 thru September 30).

**Deadwood: Lead-Deadwood Regional Hospital**  
[www.rcrh.org/Facilities/Hospitals/NorthernHillsGeneralHospital.asp](http://www.rcrh.org/Facilities/Hospitals/NorthernHillsGeneralHospital.asp)  
**Billing Contact: Patient Financial Services (605) 719-1740**  
**CY2006**

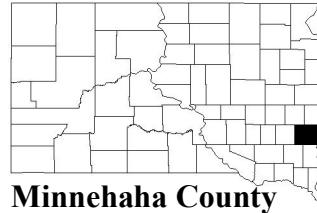


<b>DRG</b>	<b>DRG Description</b>	<b>Case Severity</b>			
		<b>Rating</b>	<b>Discharges</b>	<b>Rank</b>	<b>Median Charge</b>
143	Chest Pain	0.5637	28	1	\$ 3,515.75
89	Pneumonia, Adult, Complicated	1.0376	22	2	\$ 11,119.29
182	Digestive Disorders, Adult, Complicated	0.7853	18	3	\$ 4,697.54
127	Heart Failure and Shock	1.049	17	4	\$ 10,619.43
138	Abnormal Heart Beat, Complicated	0.8365	15	5	\$ 6,896.39
183	Digestive Disorders, Adult, Uncomplicated	0.5841	13	6	\$ 5,942.84
320	Kidney and Urinary Tract Infections, Adult, Complicated	0.8769	13	6	\$ 6,759.13
88	Chronic Obstructive Pulmonary Disease	0.8878	12	8	\$ 8,543.52

Note: Hospitals are only required to report the top 25 DRGs with at least 10 cases reported. In 2006, only the above listed DRGs had at least 10 cases reported at this hospital. (ARSD 44:66:02:01).

Case Severity Rating equals CMS Version 24 numeric weights. The following DRG codes expired on October 1, 2006 DRG 20, 24, 25, 148, 154, 415, 416, and 475 for these DRGs the case severity rating equals CMS Version 23 numeric weights.

Source: SDAHO Dimensions Program January-December 2006; Iowa Hospital Association and 3M Medicare Grouper Version 23 & 24 (Federal Fiscal Year October 1 thru September 30).



**Dell Rapids: Dells Area Health Center/Avera Health**  
**Billing Contact: Mary Jane Maiers (605) 428-5431**  
**CY2006**

DRG	DRG Description	Case Severity			
		Rating	Discharges	Rank	Median Charge
89	Pneumonia, Adult, Complicated	1.0376	38	1	\$ 4,950.05
127	Heart Failure and Shock	1.049	26	2	\$ 5,169.38
88	Chronic Obstructive Pulmonary Disease	0.8878	19	3	\$ 4,992.80
182	Digestive Disorders, Adult, Complicated	0.7853	19	3	\$ 4,442.95
183	Digestive Disorders, Adult, Uncomplicated	0.5841	19	3	\$ 2,586.05
391	Normal Newborn	0.1564	19	3	\$ 1,285.70
373	Uncomplicated Vaginal Delivery	0.3911	16	7	\$ 3,575.16
296	Disorders related to Metabolism, Adult	0.8334	13	8	\$ 3,529.20
79	Lung Infection, Complicated	1.6268	11	9	\$ 5,535.75
180	Gastrointestinal Obstruction, Complicated	0.993	11	9	\$ 4,104.75

Note: Hospitals are only required to report the top 25 DRGs with at least 10 cases reported. In 2006, only the above listed DRGs had at least 10 cases reported at this hospital. (ARSD 44:66:02:01).

Case Severity Rating equals CMS Version 24 numeric weights. The following DRG codes expired on October 1, 2006 DRG 20, 24, 25, 148, 154, 415, 416, and 475 for these DRGs  
the case severity rating equals CMS Version 23 numeric weights.

Source: SDAHO Dimensions Program January-December 2006; Iowa Hospital Association and 3M Medicare Grouper Version 23 & 24 (Federal Fiscal Year October 1 thru September 30).



**Eureka: Eureka Community Health Services  
CY2006**

**McPherson County**

<b>DRG</b>	<b>DRG Description</b>	<b>Case Severity</b>		<b>Rank</b>	<b>Median Charge</b>
		<b>Rating</b>	<b>Discharges</b>		
182	Digestive Disorders, Adult, Complicated	0.7853	12	1	\$ 2,080.83
96	Bronchitis and Asthma, Adult, Complicated	0.735	11	2	\$ 3,158.00

Note: Hospitals are only required to report the top 25 DRGs with at least 10 cases reported. In 2006, only the above listed DRGs had at least 10 cases reported at this hospital. (ARSD 44:66:02:01).

Case Severity Rating equals CMS Version 24 numeric weights. The following DRG codes expired on October 1, 2006 DRG 20, 24, 25, 148, 154, 415, 416, and 475 for these DRGs the case severity rating equals CMS Version 23 numeric weights.

Source: SDAHO Dimensions Program January-December 2006; Iowa Hospital Association and 3M Medicare Grouper Version 23 & 24 (Federal Fiscal Year October 1 thru September 30).



Faulk County

**Faulkton: Faulk County Memorial Hospital**  
**Billing Contact: Chief Financial Officer (605) 598-6262**  
**CY2006**

DRG	DRG Description	Case Severity			
		Rating	Discharges	Rank	Median Charge
89	Pneumonia, Adult, Complicated	1.0376	28	1	\$ 5,765.50
90	Pneumonia, Adult, Uncomplicated	0.6148	13	2	\$ 3,923.00
88	Chronic Obstructive Pulmonary Disease	0.8878	12	3	\$ 4,178.50
182	Digestive Disorders, Adult, Complicated	0.7853	11	4	\$ 3,313.50
463	Signs and Symptoms, Complicated	0.7158	10	5	\$ 4,507.25

Note: Hospitals are only required to report the top 25 DRGs with at least 10 cases reported. In 2006, only the above listed DRGs had at least 10 cases reported at this hospital. (ARSD 44:66:02:01).

Case Severity Rating equals CMS Version 24 numeric weights. The following DRG codes expired on October 1, 2006 DRG 20, 24, 25, 148, 154, 415, 416, and 475 for these DRGs the case severity rating equals CMS Version 23 numeric weights.

Source: SDAHO Dimensions Program January-December 2006; Iowa Hospital Association and 3M Medicare Grouper Version 23 & 24 (Federal Fiscal Year October 1 thru September 30).

**Flandreau: Flandreau Medical Center/Avera Health**

[www.flandreaumedical.org](http://www.flandreaumedical.org)

**Billing Contact: Paul Stubbe (605) 322-6400**

**CY2006**



**Moody County**

<b>DRG</b>	<b>DRG Description</b>	<b>Case Severity</b>			
		<b>Rating</b>	<b>Discharges</b>	<b>Rank</b>	<b>Median Charge</b>
182	Digestive Disorders, Adult, Complicated	0.7853	29	1	\$ 1,694.67
127	Heart Failure and Shock	1.049	20	2	\$ 2,985.19
88	Chronic Obstructive Pulmonary Disease	0.8878	16	3	\$ 2,939.72
89	Pneumonia, Adult, Complicated	1.0376	15	4	\$ 4,432.33
183	Digestive Disorders, Adult, Uncomplicated	0.5841	13	5	\$ 1,709.60
243	Medical Back Problems	0.797	13	5	\$ 2,930.40
96	Bronchitis and Asthma, Adult, Complicated	0.735	10	7	\$ 3,444.96
320	Kidney and Urinary Tract Infections, Adult, Complicated	0.8769	10	7	\$ 3,412.55

Note: Hospitals are only required to report the top 25 DRGs with at least 10 cases reported. In 2006, only the above listed DRGs had at least 10 cases reported at this hospital. (ARSD 44:66:02:01).

Case Severity Rating equals CMS Version 24 numeric weights. The following DRG codes expired on October 1, 2006 DRG 20, 24, 25, 148, 154, 415, 416, and 475 for these DRGs the case severity rating equals CMS Version 23 numeric weights.

Source: SDAHO Dimensions Program January-December 2006; Iowa Hospital Association and 3M Medicare Grouper Version 23 & 24 (Federal Fiscal Year October 1 thru September 30).

**Freeman: Freeman Medical Center**

[www.freemanregional.com](http://www.freemanregional.com)

**Billing Contact: Mark Miller (605) 925-2112**

**CY2006**



**Hutchinson County**

<b>DRG</b>	<b>DRG Description</b>	<b>Case Severity</b>			
		<b>Rating</b>	<b>Discharges</b>	<b>Rank</b>	<b>Median Charge</b>
14	Stroke	1.2118	16	1	\$ 5,399.30
89	Pneumonia, Adult, Complicated	1.0376	16	1	\$ 6,279.63
182	Digestive Disorders, Adult, Complicated	0.7853	15	3	\$ 5,338.89
127	Heart Failure and Shock	1.049	14	4	\$ 5,401.86
138	Abnormal Heart Beat, Complicated	0.8365	10	5	\$ 4,196.92

Note: Hospitals are only required to report the top 25 DRGs with at least 10 cases reported. In 2006, only the above listed DRGs had at least 10 cases reported at this hospital. (ARSD 44:66:02:01).

Case Severity Rating equals CMS Version 24 numeric weights. The following DRG codes expired on October 1, 2006 DRG 20, 24, 25, 148, 154, 415, 416, and 475 for these DRGs the case severity rating equals CMS Version 23 numeric weights.

Source: SDAHO Dimensions Program January-December 2006; Iowa Hospital Association and 3M Medicare Grouper Version 23 & 24 (Federal Fiscal Year October 1 thru September 30).



**Gettysburg: Gettysburg Memorial Hospital**  
**Billing Contact: Sandy Wager (605) 765-2480**  
**CY2006**

DRG	DRG Description	Case Severity			
		Rating	Discharges	Rank	Median Charge
89	Pneumonia, Adult, Complicated	1.0376	16	1	\$ 9,862.70
243	Medical Back Problems	0.797	13	2	\$ 6,051.81
88	Chronic Obstructive Pulmonary Disease	0.8878	11	3	\$ 9,708.01

Note: Hospitals are only required to report the top 25 DRGs with at least 10 cases reported. In 2006, only the above listed DRGs had at least 10 cases reported at this hospital. (ARSD 44:66:02:01).

Case Severity Rating equals CMS Version 24 numeric weights. The following DRG codes expired on October 1, 2006 DRG 20, 24, 25, 148, 154, 415, 416, and 475 for these DRGs the case severity rating equals CMS Version 23 numeric weights.

Source: SDAHO Dimensions Program January-December 2006; Iowa Hospital Association and 3M Medicare Grouper Version 23 & 24 (Federal Fiscal Year October 1 thru September 30).

**Gregory: Avera Gregory Healthcare Center**

[www.gregoryhealthcare.org](http://www.gregoryhealthcare.org)

**Billing Contact: Billing Office (605) 835-8394**

**CY2006**



<b>DRG</b>	<b>DRG Description</b>	<b>Case Severity</b>			
		<b>Rating</b>	<b>Discharges</b>	<b>Rank</b>	<b>Median Charge</b>
89	Pneumonia, Adult, Complicated	1.0376	97	1	\$ 4,588.10
320	Kidney and Urinary Tract Infections, Adult, Complicated	0.8769	36	2	\$ 3,991.05
391	Normal Newborn	0.1564	26	3	\$ 1,388.45
174	Stomach and Intestinal Bleeding, Complicated	1.0296	22	4	\$ 4,520.55
182	Digestive Disorders, Adult, Complicated	0.7853	18	5	\$ 3,712.00
127	Heart Failure and Shock	1.049	15	6	\$ 4,039.30
373	Uncomplicated Vaginal Delivery	0.3911	15	6	\$ 2,233.30
277	Skin Infection, Adolescent, Complicated	0.8958	14	8	\$ 3,664.20
14	Stroke	1.2118	12	9	\$ 4,170.60
79	Lung Infection, Complicated	1.6268	12	9	\$ 4,682.80
296	Disorders related to Metabolism, Adult	0.8334	11	11	\$ 3,783.90
297	Disorders related to Metabolism, Adult, Uncomplicated	0.509	11	11	\$ 4,605.80
243	Medical Back Problems	0.797	10	13	\$ 4,302.15
371	Uncomplicated Cesarean Section	0.6565	10	13	\$ 6,941.00

Note: Hospitals are only required to report the top 25 DRGs with at least 10 cases reported. In 2006, only the above listed DRGs had at least 10 cases reported at this hospital. (ARSD 44:66:02:01).

Case Severity Rating equals CMS Version 24 numeric weights. The following DRG codes expired on October 1, 2006 DRG 20, 24, 25, 148, 154, 415, 416, and 475 for these DRGs the case severity rating equals CMS Version 23 numeric weights.

Source: SDAHO Dimensions Program January-December 2006; Iowa Hospital Association and 3M Medicare Grouper Version 23 & 24 (Federal Fiscal Year October 1 thru September 30).

**Hot Springs: Fall River Health Services**

**Billing Contact: Business Office Manager (605) 745-3159 ext. 169  
CY2006**



Hospitals are only required to report the top 25 DRGs with at least 10 cases reported. In 2006, there were no DRGs with at least 10 cases reported for this hospital (ARSD 4:66:02:01)



**Hoven: Holy Infant Hospital  
CY2006**

DRG	DRG Description	Case Severity		Discharges	Rank	Median Charge
		Rating				
89	Pneumonia, Adult, Complicated	1.0376		14	1	\$ 7,993.07

Note: Hospitals are only required to report the top 25 DRGs with at least 10 cases reported. In 2006, only the above listed DRGs had at least 10 cases reported at this hospital. (ARSD 44:66:02:01).

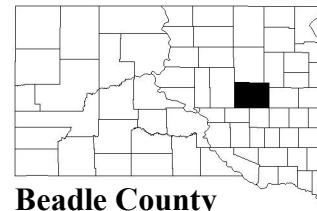
Case Severity Rating equals CMS Version 24 numeric weights. The following DRG codes expired on October 1, 2006 DRG 20, 24, 25, 148, 154, 415, 416, and 475 for these DRGs the case severity rating equals CMS Version 23 numeric weights.

Source: SDAHO Dimensions Program January-December 2006; Iowa Hospital Association and 3M Medicare Grouper Version 23 & 24 (Federal Fiscal Year October 1 thru September 30).

## Huron: Huron Regional Medical Center

[www.huronregional.org](http://www.huronregional.org)

CY2006



Beadle County

DRG	DRG Description	Case Severity			
		Rating	Discharges	Rank	Median Charge
391	Normal Newborn	0.1564	160	1	\$ 1,365.40
373	Uncomplicated Vaginal Delivery	0.3911	109	2	\$ 3,296.40
89	Pneumonia, Adult, Complicated	1.0376	86	3	\$ 8,501.63
371	Uncomplicated Cesarean Section	0.6565	51	4	\$ 7,120.40
182	Digestive Disorders, Adult, Complicated	0.7853	48	5	\$ 6,053.58
390	Newborn with Significant Problems	1.1551	44	6	\$ 1,972.55
544	Major Joint Replacement or Reattachment of Lower Extremity	1.9878	37	7	\$ 23,381.20
370	Cesarean Delivery, Complicated	0.9002	28	8	\$ 8,116.55
91	Pneumonia, Adolescent	0.5598	26	9	\$ 5,186.40
359	Hysterectomy and Ovarian Procedures	0.8053	24	10	\$ 11,719.85
127	Heart Failure and Shock	1.049	21	11	\$ 8,731.10
174	Stomach and Intestinal Bleeding, Complicated	1.0296	21	11	\$ 7,599.20
14	Stroke	1.2118	19	13	\$ 8,498.95
320	Kidney and Urinary Tract Infections, Adult, Complicated	0.8769	19	13	\$ 7,628.30
416	Infection of the Blood, Adult	1.6774	17	15	\$ 9,250.20
138	Abnormal Heart Beat, Complicated	0.8365	15	16	\$ 6,413.00
148	Major Small and Large Bowel Procedures, Complicated	3.4479	15	16	\$ 51,313.54
183	Digestive Disorders, Adult, Uncomplicated	0.5841	15	16	\$ 7,518.40
374	Normal Delivery with Tubal Ligation	0.6505	15	16	\$ 6,319.40
383	Pregnancy, Complicated	0.5103	15	16	\$ 5,602.70
78	Blood Clot in Lung	1.2357	14	21	\$ 14,242.65
121	Circulatory Disorders with Heart Attack	1.6166	14	21	\$ 11,881.30
122	Circulatory Disorders with Heart Attack Uncomplicated, Discharged Alive	0.9621	13	23	\$ 7,485.40
210	Hip Operations except Replacement, Adult, Complicated	1.9022	13	23	\$ 23,258.79
180	Gastrointestinal Obstruction, Complicated	0.993	12	25	\$ 7,370.95

Note: Case Severity Rating equals CMS Version 24 numeric weights. The following DRG codes expired on October 1, 2006 DRG 20, 24, 25, 148, 154, 415, 416, and 475 for these DRGs the case severity rating equals CMS Version 23 numeric weights.

Source: SDAHO Dimensions Program January-December 2006; Iowa Hospital Association and 3M Medicare Grouper Version 23 & 24 (Federal Fiscal Year October 1 thru September 30).

**Lemmon: Five Counties Hospital**  
**Billing Contact: Jennifer Anderson (605) 374-3871 ext. 303**  
**CY2006**



Hospitals are only required to report the top 25 DRGs with at least 10 cases reported. In 2006, there were no DRGs with at least 10 cases reported for this hospital (ARSD 4:66:02:01)

**Madison: Madison Community Hospital**

[www.madisonhospital.com](http://www.madisonhospital.com)

CY2006



**Lake County**

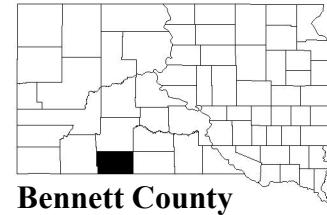
<b>DRG</b>	<b>DRG Description</b>	<b>Case Severity</b>			
		<b>Rating</b>	<b>Discharges</b>	<b>Rank</b>	<b>Median Charge</b>
391	Normal Newborn	0.1564	40	1	\$ 1,365.40
373	Uncomplicated Vaginal Delivery	0.3911	38	2	\$ 4,143.38
89	Pneumonia, Adult, Complicated	1.0376	21	3	\$ 4,646.28
182	Digestive Disorders, Adult, Complicated	0.7853	21	3	\$ 4,619.27
88	Chronic Obstructive Pulmonary Disease	0.8878	19	5	\$ 5,608.60
183	Digestive Disorders, Adult, Uncomplicated	0.5841	18	6	\$ 3,389.03
296	Disorders related to Metabolism, Adult	0.8334	17	7	\$ 4,229.38
14	Stroke	1.2118	16	8	\$ 4,458.66
320	Kidney and Urinary Tract Infections, Adult, Complicated	0.8769	15	9	\$ 4,485.60
243	Medical Back Problems	0.797	14	10	\$ 3,459.90
127	Heart Failure and Shock	1.049	11	11	\$ 4,628.80

Note: Hospitals are only required to report the top 25 DRGs with at least 10 cases reported. In 2006, only the above listed DRGs had at least 10 cases reported at this hospital. (ARSD 44:66:02:01).

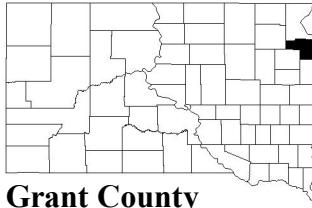
Case Severity Rating equals CMS Version 24 numeric weights. The following DRG codes expired on October 1, 2006 DRG 20, 24, 25, 148, 154, 415, 416, and 475 for these DRGs the case severity rating equals CMS Version 23 numeric weights.

Source: SDAHO Dimensions Program January-December 2006; Iowa Hospital Association and 3M Medicare Grouper Version 23 & 24 (Federal Fiscal Year October 1 thru September 30).

**Martin: Bennett County Hospital**  
**Billing Contact: Mike Glover (605) 685-6622 ext. 130**  
**CY2006**



Hospitals are only required to report the top 25 DRGs with at least 10 cases reported. In 2006, there were no DRGs with at least 10 cases reported for this hospital (ARSD 4:66:02:01)



**Milbank: Milbank Area Hospital/Avera Health**  
**Billing Contact: Paul Stubbe (605) 322-6400**  
**CY2006**

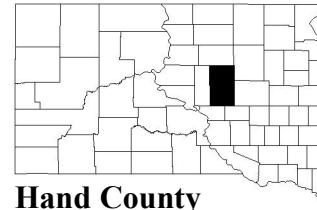
DRG	DRG Description	Case Severity			
		Rating	Discharges	Rank	Median Charge
391	Normal Newborn	0.1564	34	1	\$ 1,353.74
373	Uncomplicated Vaginal Delivery	0.3911	31	2	\$ 4,166.92
297	Disorders related to Metabolism, Adult, Uncomplicated	0.509	21	3	\$ 2,472.24
89	Pneumonia, Adult, Complicated	1.0376	18	4	\$ 5,980.89
127	Heart Failure and Shock	1.049	16	5	\$ 5,187.10
371	Uncomplicated Cesarean Section	0.6565	11	6	\$ 6,312.45
14	Stroke	1.2118	10	7	\$ 5,195.55
174	Stomach and Intestinal Bleeding, Complicated	1.0296	10	7	\$ 4,916.86
296	Disorders related to Metabolism, Adult	0.8334	10	7	\$ 5,446.62

Note: Hospitals are only required to report the top 25 DRGs with at least 10 cases reported. In 2006, only the above listed DRGs had at least 10 cases reported at this hospital. (ARSD 44:66:02:01).

Case Severity Rating equals CMS Version 24 numeric weights. The following DRG codes expired on October 1, 2006 DRG 20, 24, 25, 148, 154, 415, 416, and 475 for these DRGs the case severity rating equals CMS Version 23 numeric weights.

Source: SDAHO Dimensions Program January-December 2006; Iowa Hospital Association and 3M Medicare Grouper Version 23 & 24 (Federal Fiscal Year October 1 thru September 30).

**Miller: Hand County Memorial Hospital**  
**Billing Contact: Director of Finance (605) 853-2421**  
**CY2006**



DRG	DRG Description	Case Severity			
		Rating	Discharges	Rank	Median Charge
89	Pneumonia, Adult, Complicated	1.0376	41	1	\$ 5,497.60
88	Chronic Obstructive Pulmonary Disease	0.8878	40	2	\$ 4,813.16
182	Digestive Disorders, Adult, Complicated	0.7853	36	3	\$ 3,731.15
127	Heart Failure and Shock	1.049	35	4	\$ 5,234.16
249	Aftercare, Musculoskeletal System and Connective Tissue	0.7506	34	5	\$ 5,165.08
143	Chest Pain	0.5637	15	6	\$ 4,374.36
320	Kidney and Urinary Tract Infections, Adult, Complicated	0.8769	14	7	\$ 5,068.47
96	Bronchitis and Asthma, Adult, Complicated	0.735	13	8	\$ 4,120.00
466	Aftercare without History of Malignancy as Secondary Diagnosis	0.7634	11	9	\$ 6,297.76
138	Abnormal Heart Beat, Complicated	0.8365	10	10	\$ 2,543.16

Note: Hospitals are only required to report the top 25 DRGs with at least 10 cases reported. In 2006, only the above listed DRGs had at least 10 cases reported at this hospital. (ARSD 44:66:02:01).

Case Severity Rating equals CMS Version 24 numeric weights. The following DRG codes expired on October 1, 2006 DRG 20, 24, 25, 148, 154, 415, 416, and 475 for these DRGs the case severity rating equals CMS Version 23 numeric weights.

Source: SDAHO Dimensions Program January-December 2006; Iowa Hospital Association and 3M Medicare Grouper Version 23 & 24 (Federal Fiscal Year October 1 thru September 30).

**Mitchell: Avera Queen of Peace**

[www.averaqueenofpeace.org](http://www.averaqueenofpeace.org)

**Billing Contact: Laura Marquardt (605) 995-2547**

**CY2006**



<b>DRG</b>	<b>DRG Description</b>	<b>Case Severity</b>			
		<b>Rating</b>	<b>Discharges</b>	<b>Rank</b>	<b>Median Charge</b>
391	Normal Newborn	0.1564	415	1	\$ 1,910.05
373	Uncomplicated Vaginal Delivery	0.3911	297	2	\$ 4,396.00
89	Pneumonia, Adult, Complicated	1.0376	177	3	\$ 11,505.40
371	Uncomplicated Cesarean Section	0.6565	144	4	\$ 10,388.77
182	Digestive Disorders, Adult, Complicated	0.7853	131	5	\$ 7,943.22
544	Major Joint Replacement or Reattachment of Lower Extremity	1.9878	106	6	\$ 22,959.48
127	Heart Failure and Shock	1.049	101	7	\$ 11,572.30
390	Newborn with Significant Problems	1.1551	60	8	\$ 2,528.11
183	Digestive Disorders, Adult, Uncomplicated	0.5841	57	9	\$ 9,766.65
174	Stomach and Intestinal Bleeding, Complicated	1.0296	51	10	\$ 11,979.27
143	Chest Pain	0.5637	46	11	\$ 6,046.32
370	Cesarean Delivery, Complicated	0.9002	41	12	\$ 11,149.47
359	Hysterectomy and Ovarian Procedures	0.8053	39	13	\$ 15,525.38
14	Stroke	1.2118	38	14	\$ 11,558.89
243	Medical Back Problems	0.797	38	14	\$ 8,191.81
88	Chronic Obstructive Pulmonary Disease	0.8878	36	16	\$ 9,938.09
91	Pneumonia, Adolescent	0.5598	36	16	\$ 6,337.68
337	Removal of Prostate via Urethra, Uncomplicated	0.5877	35	18	\$ 6,406.66
320	Kidney and Urinary Tract Infections, Adult, Complicated	0.8769	33	19	\$ 7,947.01
130	Vascular Disorders, except Heart with Complications	0.9712	32	20	\$ 10,929.98
148	Major Small and Large Bowel Procedures, Complicated	3.4479	32	20	\$ 40,498.42
372	Vaginal Delivery, Complicated	0.566	29	22	\$ 4,989.67
388	Premature Infant without Major Problems	1.917	29	22	\$ 3,289.55
79	Lung Infection, Complicated	1.6268	28	24	\$ 13,406.95
296	Disorders related to Metabolism, Adult	0.8334	27	25	\$ 9,257.85

Note: Case Severity Rating equals CMS Version 24 numeric weights. The following DRG codes expired on October 1, 2006 DRG 20, 24, 25, 148, 154, 415, 416, and 475 for these DRGs the case severity rating equals CMS Version 23 numeric weights.

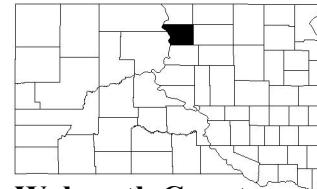
Source: SDAHO Dimensions Program January-December 2006; Iowa Hospital Association and 3M Medicare Grouper Version 23 & 24 (Federal Fiscal Year October 1 thru September 30).

**Mobridge: Mobridge Regional Hospital**

[www.mobridgehospital.org](http://www.mobridgehospital.org)

**Billing Contact: Sandy Moser (605) 845-8161**

**CY2006**



**Walworth County**

<b>DRG</b>	<b>DRG Description</b>	<b>Case Severity</b>			
		<b>Rating</b>	<b>Discharges</b>	<b>Rank</b>	<b>Median Charge</b>
391	Normal Newborn	0.1564	63	1	\$ 986.29
373	Uncomplicated Vaginal Delivery	0.3911	52	2	\$ 2,683.34
89	Pneumonia, Adult, Complicated	1.0376	37	3	\$ 5,352.30
182	Digestive Disorders, Adult, Complicated	0.7853	32	4	\$ 3,817.68
88	Chronic Obstructive Pulmonary Disease	0.8878	30	5	\$ 4,094.98
143	Chest Pain	0.5637	27	6	\$ 3,020.81
127	Heart Failure and Shock	1.049	20	7	\$ 5,002.26
183	Digestive Disorders, Adult, Uncomplicated	0.5841	19	8	\$ 3,635.44
243	Medical Back Problems	0.797	18	9	\$ 3,674.57
122	Circulatory Disorders with Heart Attack Uncomplicated, Discharged Alive	0.9621	16	10	\$ 7,387.53
90	Pneumonia, Adult, Uncomplicated	0.6148	14	11	\$ 3,994.13
140	Chest Pain	0.5041	13	12	\$ 4,027.13
277	Skin Infection, Adolescent, Complicated	0.8958	12	13	\$ 4,271.04
320	Kidney and Urinary Tract Infections, Adult, Complicated	0.8769	12	13	\$ 3,968.63

Note: Hospitals are only required to report the top 25 DRGs with at least 10 cases reported. In 2006, only the above listed DRGs had at least 10 cases reported at this hospital. (ARSD 44:66:02:01).

Case Severity Rating equals CMS Version 24 numeric weights. The following DRG codes expired on October 1, 2006 DRG 20, 24, 25, 148, 154, 415, 416, and 475 for these DRGs the case severity rating equals CMS Version 23 numeric weights.

Source: SDAHO Dimensions Program January-December 2006; Iowa Hospital Association and 3M Medicare Grouper Version 23 & 24 (Federal Fiscal Year October 1 thru September 30).

**Parkston: Avera St. Benedict Health Center**

[www.averastbenedict.org](http://www.averastbenedict.org)

**Billing Contact: Business Office Manager (605) 928-3311 ext. 145**

**CY2006**



**Hutchinson County**

<b>DRG</b>	<b>DRG Description</b>	<b>Case Severity</b>			
		<b>Rating</b>	<b>Discharges</b>	<b>Rank</b>	<b>Median Charge</b>
391	Normal Newborn	0.1564	42	1	\$ 1,580.00
89	Pneumonia, Adult, Complicated	1.0376	37	2	\$ 6,205.15
373	Uncomplicated Vaginal Delivery	0.3911	33	3	\$ 4,378.52
127	Heart Failure and Shock	1.049	17	4	\$ 5,971.82
243	Medical Back Problems	0.797	17	4	\$ 5,780.07
183	Digestive Disorders, Adult, Uncomplicated	0.5841	16	6	\$ 4,556.22
182	Digestive Disorders, Adult, Complicated	0.7853	15	7	\$ 4,007.85
174	Stomach and Intestinal Bleeding, Complicated	1.0296	12	8	\$ 10,143.98
371	Uncomplicated Cesarean Section	0.6565	10	9	\$ 9,647.86

Note: Hospitals are only required to report the top 25 DRGs with at least 10 cases reported. In 2006, only the above listed DRGs had at least 10 cases reported at this hospital. (ARSD 44:66:02:01).

Case Severity Rating equals CMS Version 24 numeric weights. The following DRG codes expired on October 1, 2006 DRG 20, 24, 25, 148, 154, 415, 416, and 475 for these DRGs the case severity rating equals CMS Version 23 numeric weights.

Source: SDAHO Dimensions Program January-December 2006; Iowa Hospital Association and 3M Medicare Grouper Version 23 & 24 (Federal Fiscal Year October 1 thru September 30).

**Philip: Hans P. Peterson Memorial Hospital**

[www.philiphealth.org](http://www.philiphealth.org)

**Billing Contact: Business Office Manager (605) 859-2511**

**CY2006**



**Haakon County**

<b>DRG</b>	<b>DRG Description</b>	<b>Case Severity</b>			
		<b>Rating</b>	<b>Discharges</b>	<b>Rank</b>	<b>Median Charge</b>
88	Chronic Obstructive Pulmonary Disease	0.8878	21	1	\$ 4,460.40
89	Pneumonia, Adult, Complicated	1.0376	21	1	\$ 6,178.30
182	Digestive Disorders, Adult, Complicated	0.7853	21	1	\$ 3,271.25
463	Signs and Symptoms, Complicated	0.7158	18	4	\$ 4,342.75
423	Other Infectious and Parasitic Diseases	1.8379	13	5	\$ 4,392.75
127	Heart Failure and Shock	1.049	12	6	\$ 4,859.68
320	Kidney and Urinary Tract Infections, Adult, Complicated	0.8769	11	7	\$ 5,032.97
462	Rehabilitation	0.946	11	7	\$ 5,086.50

Note: Hospitals are only required to report the top 25 DRGs with at least 10 cases reported. In 2006, only the above listed DRGs had at least 10 cases reported at this hospital. (ARSD 44:66:02:01).

Case Severity Rating equals CMS Version 24 numeric weights. The following DRG codes expired on October 1, 2006 DRG 20, 24, 25, 148, 154, 415, 416, and 475 for these DRGs the case severity rating equals CMS Version 23 numeric weights.

Source: SDAHO Dimensions Program January-December 2006; Iowa Hospital Association and 3M Medicare Grouper Version 23 & 24 (Federal Fiscal Year October 1 thru September 30).

Pierre: St. Mary's Healthcare Center

[www.st-marys.com](http://www.st-marys.com)

Billing Contact: Grace Fields (605) 224-3115

CY2006



Hughes County

DRG	DRG Description	Case Severity			
		Rating	Discharges	Rank	Median Charge
391	Normal Newborn	0.1564	353	1	\$ 2,145.11
373	Uncomplicated Vaginal Delivery	0.3911	265	2	\$ 4,792.56
371	Uncomplicated Cesarean Section	0.6565	99	3	\$ 9,604.91
544	Major Joint Replacement or Reattachment of Lower Extremity	1.9878	91	4	\$ 26,348.02
390	Newborn with Significant Problems	1.1551	88	5	\$ 2,601.64
89	Pneumonia, Adult, Complicated	1.0376	83	6	\$ 10,341.33
182	Digestive Disorders, Adult, Complicated	0.7853	58	7	\$ 8,715.39
416	Infection of the Blood, Adult	1.6774	54	8	\$ 11,063.73
127	Heart Failure and Shock	1.049	53	9	\$ 9,901.09
500	Back and Neck Procedure except Spinal Fusion, Uncomplicated	0.9223	53	9	\$ 16,969.79
370	Cesarean Delivery, Complicated	0.9002	48	11	\$ 11,292.47
88	Chronic Obstructive Pulmonary Disease	0.8878	46	12	\$ 9,841.65
372	Vaginal Delivery, Complicated	0.566	40	13	\$ 5,956.83
143	Chest Pain	0.5637	39	14	\$ 6,407.54
174	Stomach and Intestinal Bleeding, Complicated	1.0296	39	14	\$ 12,439.66
138	Abnormal Heart Beat, Complicated	0.8365	37	16	\$ 10,370.50
91	Pneumonia, Adolescent	0.5598	35	17	\$ 6,280.61
359	Hysterectomy and Ovarian Procedures	0.8053	31	18	\$ 11,780.35
520	Cervical Spinal Fusion, Uncomplicated	1.7569	29	19	\$ 24,224.70
210	Hip Operations except Replacement, Adult, Complicated	1.9022	25	20	\$ 23,691.30
389	Full Term Newborn with Major Problems	3.2636	25	20	\$ 10,176.52
383	Pregnancy, Complicated	0.5103	23	22	\$ 8,081.83
296	Disorders related to Metabolism, Adult	0.8334	22	23	\$ 6,712.81
98	Bronchitis and Asthma, Adolescent	0.587	21	24	\$ 7,205.50
493	Laparoscopic removal of the Gallbladder, Complicated	1.828	21	24	\$ 20,663.61

Note: Case Severity Rating equals CMS Version 24 numeric weights. The following DRG codes expired on October 1, 2006 DRG 20, 24, 25, 148, 154, 415, 416, and 475 for these DRGs  
the case severity rating equals CMS Version 23 numeric weights.

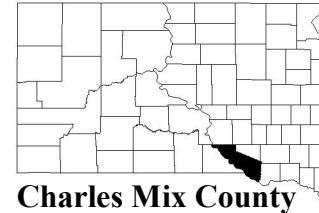
Source: SDAHO Dimensions Program January-December 2006; Iowa Hospital Association and 3M Medicare Grouper Version 23 & 24 (Federal Fiscal Year October 1 thru September 30).

**Platte: Platte Health Center**

[www.phcavera.org](http://www.phcavera.org)

**Billing Contact: Susan Holter (605) 337-3364**

**CY2006**



**Charles Mix County**

<b>DRG</b>	<b>DRG Description</b>	<b>Case Severity</b>			
		<b>Rating</b>	<b>Discharges</b>	<b>Rank</b>	<b>Median Charge</b>
89	Pneumonia, Adult, Complicated	1.0376	28	1	\$ 6,467.27
320	Kidney and Urinary Tract Infections, Adult, Complicated	0.8769	16	2	\$ 5,287.12
391	Normal Newborn	0.1564	11	3	\$ 1,438.55

Note: Hospitals are only required to report the top 25 DRGs with at least 10 cases reported. In 2006, only the above listed DRGs had at least 10 cases reported at this hospital. (ARSD 44:66:02:01).

Case Severity Rating equals CMS Version 24 numeric weights. The following DRG codes expired on October 1, 2006 DRG 20, 24, 25, 148, 154, 415, 416, and 475 for these DRGs the case severity rating equals CMS Version 23 numeric weights.

Source: SDAHO Dimensions Program January-December 2006; Iowa Hospital Association and 3M Medicare Grouper Version 23 & 24 (Federal Fiscal Year October 1 thru September 30).

**Rapid City: Black Hills Surgery Center, L.L.P.**

[www.bhsc.com](http://www.bhsc.com)

CY2006



**Pennington County**

<b>DRG</b>	<b>DRG Description</b>	<b>Case Severity</b>			
		<b>Rating</b>	<b>Discharges</b>	<b>Rank</b>	<b>Median Charge</b>
544	Major Joint Replacement or Reattachment of Lower Extremity	1.9878	380	1	\$ 24,773.39
498	Spinal Fusion, Uncomplicated	2.9896	232	2	\$ 45,325.83
497	Spinal Fusion, Complicated	3.8192	109	3	\$ 47,131.49
359	Hysterectomy and Ovarian Procedures	0.8053	81	4	\$ 13,448.72
503	Knee Procedures without Principal Diagnosis of Infection	1.245	46	5	\$ 11,118.16
520	Cervical Spinal Fusion, Uncomplicated	1.7569	43	6	\$ 32,428.94
500	Back and Neck Procedure except Spinal Fusion, Uncomplicated	0.9223	33	7	\$ 12,362.00
519	Cervical Spinal Fusion, Complicated	2.5439	32	8	\$ 33,764.20
358	Hysterectomy and Ovarian Procedures, Complicated	1.1418	30	9	\$ 15,087.03
499	Back and Neck Procedures except Spiral Fusion, Complicated	1.3887	26	10	\$ 17,824.17
491	Major Joint and Limb Reattachment Procedures of Upper Extremity	1.7203	13	11	\$ 23,523.64
496	Combined Anterior/Posterior Spinal Fusion	6.3782	13	11	\$ 43,383.43
356	Female Reproductive System Reconstructive Procedures	0.7571	12	13	\$ 10,230.54

Note: Hospitals are only required to report the top 25 DRGs with at least 10 cases reported. In 2006, only the above listed DRGs had at least 10 cases reported at this hospital. (ARSD 44:66:02:01).

Case Severity Rating equals CMS Version 24 numeric weights. The following DRG codes expired on October 1, 2006 DRG 20, 24, 25, 148, 154, 415, 416, and 475 for these DRGs the case severity rating equals CMS Version 23 numeric weights.

Source: SDAHO Dimensions Program January-December 2006; Iowa Hospital Association and 3M Medicare Grouper Version 23 & 24 (Federal Fiscal Year October 1 thru September 30).

**Rapid City: Rapid City Regional Hospital**

[www.rcrh.org](http://www.rcrh.org)

**Billing Contact: Patient Financial Services (605) 719-1740**

**CY2006**



**Pennington County**

<b>DRG</b>	<b>DRG Description</b>	<b>Case Severity</b>			
		<b>Rating</b>	<b>Discharges</b>	<b>Rank</b>	<b>Median Charge</b>
391	Normal Newborn	0.1564	1,795	1	\$ 1,898.56
373	Uncomplicated Vaginal Delivery	0.3911	1,329	2	\$ 5,185.59
430	Psychoses	0.7261	989	3	\$ 5,406.94
371	Uncomplicated Cesarean Section	0.6565	372	4	\$ 8,557.27
462	Rehabilitation	0.946	357	5	\$ 20,014.71
544	Major Joint Replacement or Reattachment of Lower Extremity	1.9878	340	6	\$ 30,823.14
426	Depression	0.5122	303	7	\$ 3,201.41
89	Pneumonia, Adult, Complicated	1.0376	300	8	\$ 11,937.53
127	Heart Failure and Shock	1.049	259	9	\$ 14,632.11
372	Vaginal Delivery, Complicated	0.566	252	10	\$ 6,167.91
88	Chronic Obstructive Pulmonary Disease	0.8878	182	11	\$ 13,153.78
557	Implant of Drug Coated Stent with Major Cardiovascular Diagnosis	2.7616	175	12	\$ 36,750.09
427	Neuroses except Depression	0.558	167	13	\$ 3,581.39
370	Cesarean Delivery, Complicated	0.9002	166	14	\$ 9,929.11
390	Newborn with Significant Problems	1.1551	166	14	\$ 3,805.03
416	Infection of the Blood, Adult	1.6774	166	14	\$ 20,723.60
174	Stomach and Intestinal Bleeding, Complicated	1.0296	158	17	\$ 14,438.82
388	Premature Infant without Major Problems	1.917	157	18	\$ 18,599.62
182	Digestive Disorders, Adult, Complicated	0.7853	153	19	\$ 9,908.81
14	Stroke	1.2118	148	20	\$ 13,756.90
138	Abnormal Heart Beat, Complicated	0.8365	138	21	\$ 11,187.05
558	Implant of Drug Coated Stent, without Major Cardiovascular Diagnosis	2.0814	131	22	\$ 33,062.24
523	Substance Abuse, Uncomplicated, without Rehabilitation	0.4196	127	23	\$ 3,146.02
374	Normal Delivery with Tubal Ligation	0.6505	120	24	\$ 9,743.03
148	Major Small and Large Bowel Procedures, Complicated	3.4479	116	25	\$ 38,865.49

Note: Case Severity Rating equals CMS Version 24 numeric weights. The following DRG codes expired on October 1, 2006 DRG 20, 24, 25, 148, 154, 415, 416, and 475 for these DRGs the case severity rating equals CMS Version 23 numeric weights.

Source: SDAHO Dimensions Program January-December 2006; Iowa Hospital Association and 3M Medicare Grouper Version 23 & 24 (Federal Fiscal Year October 1 thru September 30).



**Rapid City: Same Day Surgery Center, L.L.C.  
CY2006**

**Pennington County**

<b>DRG</b>	<b>DRG Description</b>	<b>Case Severity</b>		<b>Rank</b>	<b>Median Charge</b>
		<b>Rating</b>	<b>Discharges</b>		
359	Hysterectomy and Ovarian Procedures	0.8053	185	1	\$ 8,133.30
356	Female Reproductive System Reconstructive Procedures	0.7571	45	2	\$ 8,449.64
358	Hysterectomy and Ovarian Procedures, Complicated	1.1418	19	3	\$ 8,529.54
355	Procedures for Cancer on Female Reproductive Organs except the Ovary, Uncomplicated	0.9074	15	4	\$ 10,145.85
258	Total Mastectomy for Cancer, Uncomplicated	0.713	10	5	\$ 11,993.41

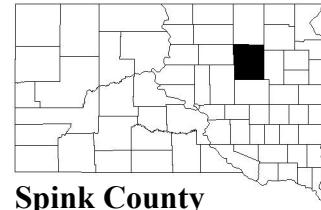
Note: Hospitals are only required to report the top 25 DRGs with at least 10 cases reported. In 2006, only the above listed DRGs had at least 10 cases reported at this hospital. (ARSD 44:66:02:01).

Case Severity Rating equals CMS Version 24 numeric weights. The following DRG codes expired on October 1, 2006 DRG 20, 24, 25, 148, 154, 415, 416, and 475 for these DRGs the case severity rating equals CMS Version 23 numeric weights.

Source: SDAHO Dimensions Program January-December 2006; Iowa Hospital Association and 3M Medicare Grouper Version 23 & 24 (Federal Fiscal Year October 1 thru September 30).

**Redfield: Community Memorial Hospital**  
[www.redfield-sd.com/hospital.html](http://www.redfield-sd.com/hospital.html)

CY2006



<b>DRG</b>	<b>DRG Description</b>	<b>Case Severity</b>			
		<b>Rating</b>	<b>Discharges</b>	<b>Rank</b>	<b>Median Charge</b>
89	Pneumonia, Adult, Complicated	1.0376	59	1	\$ 5,072.00
88	Chronic Obstructive Pulmonary Disease	0.8878	30	2	\$ 5,231.00
182	Digestive Disorders, Adult, Complicated	0.7853	22	3	\$ 2,206.00
296	Disorders related to Metabolism, Adult	0.8334	16	4	\$ 3,988.00
143	Chest Pain	0.5637	12	5	\$ 1,658.50
320	Kidney and Urinary Tract Infections, Adult, Complicated	0.8769	11	6	\$ 4,452.00
127	Heart Failure and Shock	1.049	10	7	\$ 5,150.00
140	Chest Pain	0.5041	10	7	\$ 2,554.50

Note: Hospitals are only required to report the top 25 DRGs with at least 10 cases reported. In 2006, only the above listed DRGs had at least 10 cases reported at this hospital. (ARSD 44:66:02:01).

Case Severity Rating equals CMS Version 24 numeric weights. The following DRG codes expired on October 1, 2006 DRG 20, 24, 25, 148, 154, 415, 416, and 475 for these DRGs the case severity rating equals CMS Version 23 numeric weights.

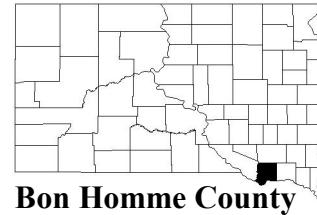
Source: SDAHO Dimensions Program January-December 2006; Iowa Hospital Association and 3M Medicare Grouper Version 23 & 24 (Federal Fiscal Year October 1 thru September 30).

**Scotland: Landmann-Jungman Memorial Hospital**

[www.ljmh.org](http://www.ljmh.org)

**Billing Contact: Jay Weidenbach or Judy Peacock (605) 583-6109**

**CY2006**



<b>DRG</b>	<b>DRG Description</b>	<b>Case Severity</b>			
		<b>Rating</b>	<b>Discharges</b>	<b>Rank</b>	<b>Median Charge</b>
89	Pneumonia, Adult, Complicated	1.0376	37	1	\$ 5,902.09
90	Pneumonia, Adult, Uncomplicated	0.6148	12	2	\$ 5,669.16
182	Digestive Disorders, Adult, Complicated	0.7853	10	3	\$ 4,800.59

Note: Hospitals are only required to report the top 25 DRGs with at least 10 cases reported. In 2006, only the above listed DRGs had at least 10 cases reported at this hospital. (ARSD 44:66:02:01).

Case Severity Rating equals CMS Version 24 numeric weights. The following DRG codes expired on October 1, 2006 DRG 20, 24, 25, 148, 154, 415, 416, and 475 for these DRGs the case severity rating equals CMS Version 23 numeric weights.

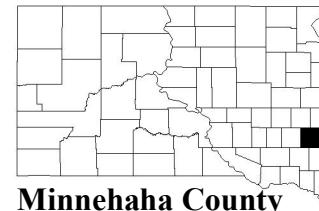
Source: SDAHO Dimensions Program January-December 2006; Iowa Hospital Association and 3M Medicare Grouper Version 23 & 24 (Federal Fiscal Year October 1 thru September 30).

**Sioux Falls: Avera Heart Hospital of South Dakota**

[www.southdakotaheart.com](http://www.southdakotaheart.com)

**Billing Contact: Jamie Schaefer (605) 977-7014**

**CY2006**



**Minnehaha County**

<b>DRG</b>	<b>DRG Description</b>	<b>Case Severity</b>			
		<b>Rating</b>	<b>Discharges</b>	<b>Rank</b>	<b>Median Charge</b>
558	Implant of Drug Coated Stent, without Major Cardiovascular Diagnosis	2.0814	396	1	\$ 26,005.80
557	Implant of Drug Coated Stent with Major Cardiovascular Diagnosis	2.7616	338	2	\$ 33,393.42
555	Coronary Catheterization with Major Cardiovascular Diagnosis	2.3066	156	3	\$ 24,917.69
550	Coronary Bypass without Cardiac Catheterization without Cardiovascular Diagnosis	3.5904	152	4	\$ 44,458.54
138	Abnormal Heart Beat, Complicated	0.8365	146	5	\$ 9,022.03
127	Heart Failure and Shock	1.049	119	6	\$ 13,829.05
105	Cardiac Valve and Other Major Cardiothoracic Procedures Without Cardiac Catheterization	6.0567	104	7	\$ 63,348.44
479	Other Vascular Procedures, Uncomplicated	1.4401	104	7	\$ 21,004.24
121	Circulatory Disorders with Heart Attack	1.6166	103	9	\$ 16,021.80
110	Major Cardiovascular Procedures Complicated	3.8064	99	10	\$ 52,301.88
534	Extracranial Procedures, Uncomplicated	0.9926	99	10	\$ 14,489.30
556	Implant of Non Drug Coated Stent without a Cardiovascular Diagnosis	1.7747	99	10	\$ 17,190.48
124	Circulatory Disorders, except Heart Attack	1.4099	98	13	\$ 11,913.88
125	Circulatory Disorders except Heart Attack, with Cardiac Catheterization	1.053	94	14	\$ 10,883.64
122	Circulatory Disorders with Heart Attack Uncomplicated, Discharged Alive	0.9621	92	15	\$ 11,630.65
554	Other Vascular Procedures Complicated without Major Cardiovascular Diagnosis	2.0773	88	16	\$ 27,865.36
139	Abnormal Heart Beat, Uncomplicated	0.5297	82	17	\$ 5,961.02
515	Cardiac Defibrillator Implant without Cardiac Catheterization	5.2293	82	17	\$ 57,971.64
547	Coronary Bypass with Cardiac Catheterization with Major Cardiovascular Diagnosis	6.139	72	19	\$ 61,590.61
533	Extracranial Procedures, Complicated	1.5463	66	20	\$ 17,750.76
552	Pacemaker without Cardiovascular Diagnosis	2.086	66	20	\$ 19,436.73
315	Kidney and Urinary Tract Procedures	2.1173	59	22	\$ 20,524.80
111	Cardiovascular Procedures, Uncomplicated	2.4879	55	23	\$ 43,220.54
518	Cardiac Catheterization without Heart Attack without Coronary Artery Stent Implant	1.6388	55	23	\$ 22,929.31
549	Coronary Bypass with Cardiac Catheterization without Major Cardiovascular Diagnosis	5.0246	47	25	\$ 53,753.84

Note: Case Severity Rating equals CMS Version 24 numeric weights. The following DRG codes expired on October 1, 2006 DRG 20, 24, 25, 148, 154, 415, 416, and 475 for these DRGs the case severity rating equals CMS Version 23 numeric weights.

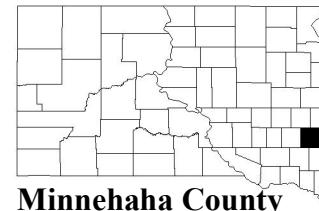
Source: SDAHO Dimensions Program January-December 2006; Iowa Hospital Association and 3M Medicare Grouper Version 23 & 24 (Federal Fiscal Year October 1 thru September 30).

**Sioux Falls: Avera McKennan Hospital**

[www.mckennan.org](http://www.mckennan.org)

**Billing Contact: Paul Stubbe (605) 322-6400**

**CY2006**



<b>DRG</b>	<b>DRG Description</b>	<b>Case Severity</b>			
		<b>Rating</b>	<b>Discharges</b>	<b>Rank</b>	<b>Median Charge</b>
430	Psychoses	0.7261	2,057	1	\$ 6,790.54
391	Normal Newborn	0.1564	1,090	2	\$ 1,840.40
544	Major Joint Replacement or Reattachment of Lower Extremity	1.9878	882	3	\$ 30,072.79
373	Uncomplicated Vaginal Delivery	0.3911	834	4	\$ 4,125.90
426	Depression	0.5122	810	5	\$ 5,261.24
462	Rehabilitation	0.946	404	6	\$ 15,738.83
431	Childhood Mental Disorders	0.6729	354	7	\$ 8,965.82
427	Neuroses except Depression	0.558	332	8	\$ 3,562.11
371	Uncomplicated Cesarean Section	0.6565	301	9	\$ 8,913.04
182	Digestive Disorders, Adult, Complicated	0.7853	274	10	\$ 12,342.83
127	Heart Failure and Shock	1.049	228	11	\$ 13,665.87
88	Chronic Obstructive Pulmonary Disease	0.8878	205	12	\$ 10,035.22
89	Pneumonia, Adult, Complicated	1.0376	200	13	\$ 12,295.23
316	Kidney Failure	1.2602	194	14	\$ 15,371.44
359	Hysterectomy and Ovarian Procedures	0.8053	185	15	\$ 15,506.08
14	Stroke	1.2118	182	16	\$ 15,861.56
12	Alzheimer's	0.9322	175	17	\$ 13,147.33
174	Stomach and Intestinal Bleeding, Complicated	1.0296	173	18	\$ 11,791.91
370	Cesarean Delivery, Complicated	0.9002	166	19	\$ 10,874.87
358	Hysterectomy and Ovarian Procedures, Complicated	1.1418	160	20	\$ 17,085.06
499	Back and Neck Procedures except Spiral Fusion, Complicated	1.3887	160	20	\$ 23,562.03
372	Vaginal Delivery, Complicated	0.566	159	22	\$ 5,637.80
390	Newborn with Significant Problems	1.1551	155	23	\$ 2,592.63
243	Medical Back Problems	0.797	150	24	\$ 11,518.09
497	Spinal Fusion, Complicated	3.8192	149	25	\$ 53,909.24

Note: Case Severity Rating equals CMS Version 24 numeric weights. The following DRG codes expired on October 1, 2006 DRG 20, 24, 25, 148, 154, 415, 416, and 475 for these DRGs the case severity rating equals CMS Version 23 numeric weights.

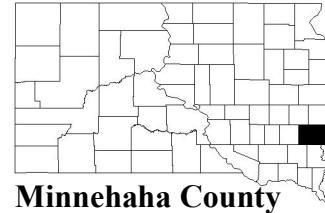
Source: SDAHO Dimensions Program January-December 2006; Iowa Hospital Association and 3M Medicare Grouper Version 23 & 24 (Federal Fiscal Year October 1 thru September 30).

**Sioux Falls: Children's Care Hospital**

[www.cchs.org](http://www.cchs.org)

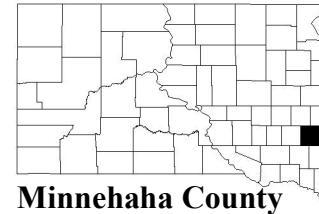
**Billing Contact: Jamie Schafer (605) 977-7014**

**CY2006**



Hospitals not utilizing DRGs are exempt from reporting requirements. In 2006, this hospital did not utilize DRGs. (ARSD 44:66:02:01)

**Sioux Falls: Select Specialty Hospital**  
**Billing Contact: Business Office (605) 322-3500**  
**CY2006**



DRG	DRG Description	Case Severity			
		Rating	Discharges	Rank	Median Charge
475	Respiratory Failure with Ventilator Support	3.6091	24	1	\$ 123,066.26
87	Pulmonary Edema and Respiratory Failure	1.3838	17	2	\$ 61,612.17
79	Lung Infection, Complicated	1.6268	12	3	\$ 54,080.50
418	Post Operative Infections	1.0993	12	3	\$ 62,788.15
416	Infection of the Blood, Adult	1.6774	11	5	\$ 64,910.59
316	Kidney Failure	1.2602	10	6	\$ 66,401.23

Note: Hospitals are only required to report the top 25 DRGs with at least 10 cases reported. In 2006, only the above listed DRGs had at least 10 cases reported at this hospital. (ARSD 44:66:02:01).

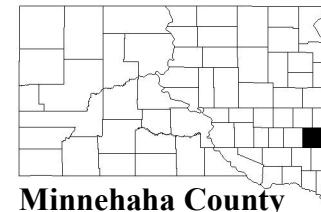
Case Severity Rating equals CMS Version 24 numeric weights. The following DRG codes expired on October 1, 2006 DRG 20, 24, 25, 148, 154, 415, 416, and 475 for these DRGs the case severity rating equals CMS Version 23 numeric weights.

Source: SDAHO Dimensions Program January-December 2006; Iowa Hospital Association and 3M Medicare Grouper Version 23 & 24 (Federal Fiscal Year October 1 thru September 30).

**Sioux Falls: Sioux Falls Surgical Center, L.L.P.**

[www.sfsurgical.com](http://www.sfsurgical.com)

CY2006



<b>DRG</b>	<b>DRG Description</b>	<b>Case Severity</b>			
		<b>Rating</b>	<b>Discharges</b>	<b>Rank</b>	<b>Median Charge</b>
544	Major Joint Replacement or Reattachment of Lower Extremity	1.9878	249	1	\$ 27,197.14
224	Shoulder, Elbow or Forearm Procedures, except Major Joint Procedures, Uncomplicated	0.8574	84	2	\$ 12,714.27
359	Hysterectomy and Ovarian Procedures	0.8053	72	3	\$ 17,457.25
503	Knee Procedures without Principal Diagnosis of Infection	1.245	64	4	\$ 13,711.50
498	Spinal Fusion, Uncomplicated	2.9896	55	5	\$ 57,311.71
261	Breast Procedure for Non-Malignancy except Biopsy and Local Excision	0.9535	54	6	\$ 5,940.00
500	Back and Neck Procedure except Spinal Fusion, Uncomplicated	0.9223	42	7	\$ 17,737.32
223	Major Shoulder/Elbow Procedure, or Other Upper Extremity Procedure, Complicated	1.1726	39	8	\$ 17,521.25
288	O.R. Procedures for Obesity including Gastric Bypass/Banding	1.913	27	9	\$ 4,405.00
520	Cervical Spinal Fusion, Uncomplicated	1.7569	20	10	\$ 44,978.13
358	Hysterectomy and Ovarian Procedures, Complicated	1.1418	16	11	\$ 18,861.25
60	Tonsillectomy and/or Adenoidectomy Only, Adolescents	0.2137	14	12	\$ 4,285.00
491	Major Joint and Limb Reattachment Procedures of Upper Extremity	1.7203	14	12	\$ 25,664.25
538	Local Excision and Removal of Internal Fixation Devices Except Hip and Femur, Uncomplicated	1.0282	14	12	\$ 17,619.13
356	Female Reproductive System Reconstructive Procedures	0.7571	13	15	\$ 14,315.69
219	Lower Extrem & Humer Procedure except Hip, Foot, Femur Adult, Uncomplicated	1.1033	12	16	\$ 10,460.94
227	Soft Tissue Procedures, Uncomplicated	0.8618	11	17	\$ 12,637.75

Note: Hospitals are only required to report the top 25 DRGs with at least 10 cases reported. In 2006, only the above listed DRGs had at least 10 cases reported at this hospital. (ARSD 44:66:02:01).

Case Severity Rating equals CMS Version 24 numeric weights. The following DRG codes expired on October 1, 2006 DRG 20, 24, 25, 148, 154, 415, 416, and 475 for these DRGs the case severity rating equals CMS Version 23 numeric weights.

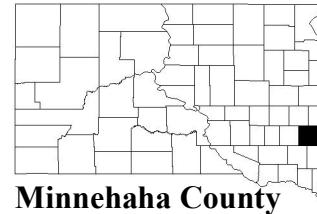
Source: SDAHO Dimensions Program January-December 2006; Iowa Hospital Association and 3M Medicare Grouper Version 23 & 24 (Federal Fiscal Year October 1 thru September 30).

**Sioux Falls: Sioux Valley Hospital**

[www.siouxvalley.org](http://www.siouxvalley.org)

**Billing Contact: Tony Morrison (605) 328-8380**

**CY2006**



**Minnehaha County**

<b>DRG</b>	<b>DRG Description</b>	<b>Case Severity</b>			
		<b>Rating</b>	<b>Discharges</b>	<b>Rank</b>	<b>Median Charge</b>
391	Normal Newborn	0.1564	2,349	1	\$ 2,062.45
373	Uncomplicated Vaginal Delivery	0.3911	1,855	2	\$ 5,787.57
544	Major Joint Replacement or Reattachment of Lower Extremity	1.9878	888	3	\$ 33,096.18
371	Uncomplicated Cesarean Section	0.6565	739	4	\$ 10,473.43
359	Hysterectomy and Ovarian Procedures	0.8053	564	5	\$ 16,933.28
558	Implant of Drug Coated Stent, without Major Cardiovascular Diagnosis	2.0814	481	6	\$ 20,679.28
462	Rehabilitation	0.946	461	7	\$ 17,717.58
288	O.R. Procedures for Obesity including Gastric Bypass/Banding	1.913	320	8	\$ 18,875.36
390	Newborn with Significant Problems	1.1551	301	9	\$ 3,253.75
89	Pneumonia, Adult, Complicated	1.0376	290	10	\$ 13,794.76
182	Digestive Disorders, Adult, Complicated	0.7853	288	11	\$ 10,169.04
98	Bronchitis and Asthma, Adolescent	0.587	281	12	\$ 7,175.96
388	Premature Infant without Major Problems	1.917	270	13	\$ 17,692.90
14	Stroke	1.2118	266	14	\$ 15,479.14
127	Heart Failure and Shock	1.049	254	15	\$ 12,385.92
557	Implant of Drug Coated Stent with Major Cardiovascular Diagnosis	2.7616	238	16	\$ 29,266.75
91	Pneumonia, Adolescent	0.5598	233	17	\$ 9,217.60
88	Chronic Obstructive Pulmonary Disease	0.8878	226	18	\$ 14,741.68
498	Spinal Fusion, Uncomplicated	2.9896	221	19	\$ 56,414.00
372	Vaginal Delivery, Complicated	0.566	211	20	\$ 7,063.53
389	Full Term Newborn with Major Problems	3.2636	193	21	\$ 22,584.38
148	Major Small and Large Bowel Procedures, Complicated	3.4479	188	22	\$ 43,776.61
243	Medical Back Problems	0.797	187	23	\$ 10,031.79
125	Circulatory Disorders except Heart Attack, with Cardiac Catheterization	1.053	181	24	\$ 10,455.10
370	Cesarean Delivery, Complicated	0.9002	178	25	\$ 12,595.15

Note: Case Severity Rating equals CMS Version 24 numeric weights. The following DRG codes expired on October 1, 2006 DRG 20, 24, 25, 148, 154, 415, 416, and 475 for these DRGs the case severity rating equals CMS Version 23 numeric weights.

Source: SDAHO Dimensions Program January-December 2006; Iowa Hospital Association and 3M Medicare Grouper Version 23 & 24 (Federal Fiscal Year October 1 thru September 30).

**Sisseton: Coteau Des Prairies Hospital**

[www.cdhospital.com](http://www.cdhospital.com)

CY2006



**Roberts County**

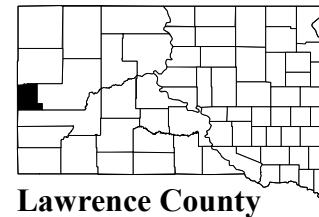
<b>DRG</b>	<b>DRG Description</b>	<b>Case Severity</b>			
		<b>Rating</b>	<b>Discharges</b>	<b>Rank</b>	<b>Median Charge</b>
391	Normal Newborn	0.1564	137	1	\$ 1,825.20
373	Uncomplicated Vaginal Delivery	0.3911	102	2	\$ 3,710.35
127	Heart Failure and Shock	1.049	31	3	\$ 4,954.65
182	Digestive Disorders, Adult, Complicated	0.7853	25	4	\$ 4,278.55
89	Pneumonia, Adult, Complicated	1.0376	24	5	\$ 6,203.18
372	Vaginal Delivery, Complicated	0.566	23	6	\$ 3,777.60
383	Pregnancy, Complicated	0.5103	19	7	\$ 4,157.90
98	Bronchitis and Asthma, Adolescent	0.587	17	8	\$ 2,639.10
174	Stomach and Intestinal Bleeding, Complicated	1.0296	15	9	\$ 5,569.70
359	Hysterectomy and Ovarian Procedures	0.8053	15	9	\$ 8,680.40
371	Uncomplicated Cesarean Section	0.6565	15	9	\$ 7,384.95
390	Newborn with Significant Problems	1.1551	15	9	\$ 2,664.00
91	Pneumonia, Adolescent	0.5598	14	13	\$ 3,129.58
385	Newborn Died or Transferred to Another Acute Care Facility	1.4107	12	14	\$ 1,488.60
416	Infection of the Blood, Adult	1.6774	12	14	\$ 5,905.73
370	Cesarean Delivery, Complicated	0.9002	11	16	\$ 8,732.60

Note: Hospitals are only required to report the top 25 DRGs with at least 10 cases reported. In 2006, only the above listed DRGs had at least 10 cases reported at this hospital. (ARSD 44:66:02:01).

Case Severity Rating equals CMS Version 24 numeric weights. The following DRG codes expired on October 1, 2006 DRG 20, 24, 25, 148, 154, 415, 416, and 475 for these DRGs the case severity rating equals CMS Version 23 numeric weights.

Source: SDAHO Dimensions Program January-December 2006; Iowa Hospital Association and 3M Medicare Grouper Version 23 & 24 (Federal Fiscal Year October 1 thru September 30).

**Spearfish: Spearfish Regional Hospital**  
[www.rcrh.org/Facilities/Hospitals/LookoutMemorial.asp](http://www.rcrh.org/Facilities/Hospitals/LookoutMemorial.asp)  
**Billing Contact: Patient Financial Services (605) 719-1740**  
**CY2006**



**Lawrence County**

<b>DRG</b>	<b>DRG Description</b>	<b>Case Severity</b>			
		<b>Rating</b>	<b>Discharges</b>	<b>Rank</b>	<b>Median Charge</b>
391	Normal Newborn	0.1564	476	1	\$ 1,674.53
373	Uncomplicated Vaginal Delivery	0.3911	336	2	\$ 4,685.00
371	Uncomplicated Cesarean Section	0.6565	120	3	\$ 7,373.08
544	Major Joint Replacement or Reattachment of Lower Extremity	1.9878	120	3	\$ 27,329.72
89	Pneumonia, Adult, Complicated	1.0376	63	5	\$ 10,465.10
372	Vaginal Delivery, Complicated	0.566	45	6	\$ 5,508.72
390	Newborn with Significant Problems	1.1551	34	7	\$ 2,594.57
182	Digestive Disorders, Adult, Complicated	0.7853	30	8	\$ 6,374.53
127	Heart Failure and Shock	1.049	27	9	\$ 9,177.35
138	Abnormal Heart Beat, Complicated	0.8365	23	10	\$ 5,367.54
296	Disorders related to Metabolism, Adult	0.8334	23	10	\$ 8,225.81
374	Normal Delivery with Tubal Ligation	0.6505	22	12	\$ 7,521.63
385	Newborn Died or Transferred to Another Acute Care Facility	1.4107	21	13	\$ 2,229.28
88	Chronic Obstructive Pulmonary Disease	0.8878	19	14	\$ 8,759.51
174	Stomach and Intestinal Bleeding, Complicated	1.0296	19	14	\$ 10,054.53
14	Stroke	1.2118	16	16	\$ 9,318.56
148	Major Small and Large Bowel Procedures, Complicated	3.4479	16	16	\$ 41,583.45
320	Kidney and Urinary Tract Infections, Adult, Complicated	0.8769	16	16	\$ 5,472.83
359	Hysterectomy and Ovarian Procedures	0.8053	16	16	\$ 12,599.89
210	Hip Operations except Replacement, Adult, Complicated	1.9022	14	20	\$ 21,268.44
383	Pregnancy, Complicated	0.5103	14	20	\$ 5,006.85
180	Gastrointestinal Obstruction, Complicated	0.993	13	22	\$ 8,448.13
219	Lower Extrem & Humer Procedure except Hip, Foot, Femur Adult, Uncomplicated	1.1033	13	22	\$ 17,684.93
79	Lung Infection, Complicated	1.6268	12	24	\$ 10,836.83
91	Pneumonia, Adolescent	0.5598	12	24	\$ 6,258.71
139	Abnormal Heart Beat, Uncomplicated	0.5297	12	24	\$ 4,757.96
143	Chest Pain	0.5637	12	24	\$ 5,516.42
243	Medical back problems	0.797	12	24	\$ 8,087.54
370	Cesarean Delivery, Complicated	0.9002	12	24	\$ 8,257.78
545	Hip or Knee Replacement Revision	2.5337	12	24	\$ 26,569.41

Note: Case Severity Rating equals CMS Version 24 numeric weights. The following DRG codes expired on October 1, 2006 DRG 20, 24, 25, 148, 154, 415, 416, and 475 for these DRGs the case severity rating equals CMS Version 23 numeric weights.

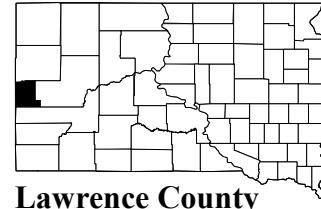
Source: SDAHO Dimensions Program January-December 2006; Iowa Hospital Association and 3M Medicare Grouper Version 23 & 24 (Federal Fiscal Year October 1 thru September 30).

**Spearfish: Spearfish Surgery Center, L.L.C.**

[www.qcmc.org](http://www.qcmc.org)

**Billing Contact: Mike DeLano, Director of Patient Services or Linda M. Harlan, CFO**

**CY2006**



**Lawrence County**

<b>DRG</b>	<b>DRG Description</b>	<b>Case Severity</b>			
		<b>Rating</b>	<b>Discharges</b>	<b>Rank</b>	<b>Median Charge</b>
544	Major Joint Replacement or Reattachment of Lower Extremity	1.9878	42	1	\$ 19,013.00
288	O.R. Procedures for Obesity including Gastric Bypass/Banding	1.913	23	2	\$ 13,846.00
360	Vagina, Cervix and Vulva Procedures	0.8811	19	3	\$ 10,026.50
359	Hysterectomy and Ovarian Procedures	0.8053	15	4	\$ 9,206.00
149	Small and Large Bowel Operations, Uncomplicated	1.4357	10	5	\$ 10,193.75

Note: Hospitals are only required to report the top 25 DRGs with at least 10 cases reported. In 2006, only the above listed DRGs had at least 10 cases reported at this hospital. (ARSD 44:66:02:01).

Case Severity Rating equals CMS Version 24 numeric weights. The following DRG codes expired on October 1, 2006 DRG 20, 24, 25, 148, 154, 415, 416, and 475 for these DRGs the case severity rating equals CMS Version 23 numeric weights.

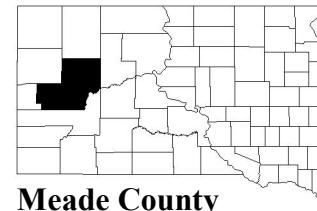
Source: SDAHO Dimensions Program January-December 2006; Iowa Hospital Association and 3M Medicare Grouper Version 23 & 24 (Federal Fiscal Year October 1 thru September 30).

**Sturgis: Sturgis Regional Hospital**

[www.rcrh.org/Facilities/Hospitals/SCHCC/Default.asp](http://www.rcrh.org/Facilities/Hospitals/SCHCC/Default.asp)

**Billing Contact: Patient Financial Services (605) 719-1740**

**CY2006**



**Meade County**

<b>DRG</b>	<b>DRG Description</b>	<b>Case Severity</b>			
		<b>Rating</b>	<b>Discharges</b>	<b>Rank</b>	<b>Median Charge</b>
89	Pneumonia, Adult, Complicated	1.0376	67	1	\$ 11,926.66
391	Normal Newborn	0.1564	37	2	\$ 1,517.96
182	Digestive Disorders, Adult, Complicated	0.7853	34	3	\$ 4,823.98
373	Uncomplicated Vaginal Delivery	0.3911	30	4	\$ 4,369.79
183	Digestive Disorders, Adult, Uncomplicated	0.5841	27	5	\$ 4,121.65
88	Chronic Obstructive Pulmonary Disease	0.8878	19	6	\$ 6,482.08
127	Heart Failure and Shock	1.049	18	7	\$ 10,568.31
90	Pneumonia, Adult, Uncomplicated	0.6148	15	8	\$ 9,057.95
174	Stomach and Intestinal Bleeding, Complicated	1.0296	14	9	\$ 8,232.57
243	Medical Back Problems	0.797	14	9	\$ 9,712.68
297	Disorders related to Metabolism, Adult, Uncomplicated	0.509	11	11	\$ 3,367.35
324	Urinary Stones, Uncomplicated	0.5049	10	12	\$ 3,483.11

Note: Hospitals are only required to report the top 25 DRGs with at least 10 cases reported. In 2006, only the above listed DRGs had at least 10 cases reported at this hospital. (ARSD 44:66:02:01).

Case Severity Rating equals CMS Version 24 numeric weights. The following DRG codes expired on October 1, 2006 DRG 20, 24, 25, 148, 154, 415, 416, and 475 for these DRGs the case severity rating equals CMS Version 23 numeric weights.

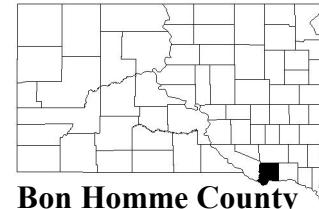
Source: SDAHO Dimensions Program January-December 2006; Iowa Hospital Association and 3M Medicare Grouper Version 23 & 24 (Federal Fiscal Year October 1 thru September 30).

**Tyndall: St. Michael's Hospital**

[www.aver.org/ash/stmichaels](http://www.aver.org/ash/stmichaels)

**Billing Contact: Business Office Supervisor (605) 589-3341**

**CY2006**



**Bon Homme County**

<b>DRG</b>	<b>DRG Description</b>	<b>Case Severity</b>			
		<b>Rating</b>	<b>Discharges</b>	<b>Rank</b>	<b>Median Charge</b>
462	Rehabilitation	0.946	37	1	\$ 5,862.55
89	Pneumonia, Adult, Complicated	1.0376	31	2	\$ 6,584.00
127	Heart Failure and Shock	1.049	14	3	\$ 6,116.35
182	Digestive Disorders, Adult, Complicated	0.7853	14	3	\$ 4,856.86

Note: Hospitals are only required to report the top 25 DRGs with at least 10 cases reported. In 2006, only the above listed DRGs had at least 10 cases reported at this hospital. (ARSD 44:66:02:01).

Case Severity Rating equals CMS Version 24 numeric weights. The following DRG codes expired on October 1, 2006 DRG 20, 24, 25, 148, 154, 415, 416, and 475 for these DRGs the case severity rating equals CMS Version 23 numeric weights.

Source: SDAHO Dimensions Program January-December 2006; Iowa Hospital Association and 3M Medicare Grouper Version 23 & 24 (Federal Fiscal Year October 1 thru September 30).

**Vermillion: Sioux Valley Vermillion Hospital**

[www.siouxvalleyvermillion.org](http://www.siouxvalleyvermillion.org)

**Billing Contact: Bobbie Jones (605) 624-2611 ext. 144**

**CY2006**



**Clay County**

<b>DRG</b>	<b>DRG Description</b>	<b>Case Severity</b>			
		<b>Rating</b>	<b>Discharges</b>	<b>Rank</b>	<b>Median Charge</b>
391	Normal Newborn	0.1564	98	1	\$ 1,552.15
373	Uncomplicated Vaginal Delivery	0.3911	64	2	\$ 4,015.62
371	Uncomplicated Cesarean Section	0.6565	31	3	\$ 11,501.95
89	Pneumonia, Adult, Complicated	1.0376	25	4	\$ 8,171.71
127	Heart Failure and Shock	1.049	22	5	\$ 5,637.64
182	Digestive Disorders, Adult, Complicated	0.7853	19	6	\$ 6,279.71
88	Chronic Obstructive Pulmonary Disease	0.8878	13	7	\$ 6,120.94
296	Disorders related to Metabolism, Adult	0.8334	13	7	\$ 5,126.84
79	Lung Infection, Complicated	1.6268	12	9	\$ 10,280.05
320	Kidney and Urinary Tract Infections, Adult, Complicated	0.8769	12	9	\$ 6,383.45
174	Stomach and Intestinal Bleeding, Complicated	1.0296	11	11	\$ 8,680.49

Note: Hospitals are only required to report the top 25 DRGs with at least 10 cases reported. In 2006, only the above listed DRGs had at least 10 cases reported at this hospital. (ARSD 44:66:02:01).

Case Severity Rating equals CMS Version 24 numeric weights. The following DRG codes expired on October 1, 2006 DRG 20, 24, 25, 148, 154, 415, 416, and 475 for these DRGs the case severity rating equals CMS Version 23 numeric weights.

Source: SDAHO Dimensions Program January-December 2006; Iowa Hospital Association and 3M Medicare Grouper Version 23 & 24 (Federal Fiscal Year October 1 thru September 30).

**Viborg: Pioneer Memorial Hospital**[www.pioneermemorial.org](http://www.pioneermemorial.org)**Billing Contact: Anne Christiansen, CFO (605) 326-5161****CY2006****Turner County**

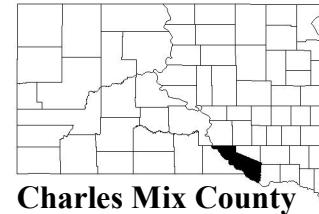
<b>DRG</b>	<b>DRG Description</b>	<b>Case Severity</b>		<b>Rank</b>	<b>Median Charge</b>
		<b>Rating</b>	<b>Discharges</b>		
89	Pneumonia, Adult, Complicated	1.0376	15	1	\$ 6,969.60
88	Chronic Obstructive Pulmonary Disease	0.8878	12	2	\$ 7,429.20
127	Heart Failure and Shock	1.049	12	2	\$ 7,450.28

Note: Hospitals are only required to report the top 25 DRGs with at least 10 cases reported. In 2006, only the above listed DRGs had at least 10 cases reported at this hospital. (ARSD 44:66:02:01).

Case Severity Rating equals CMS Version 24 numeric weights. The following DRG codes expired on October 1, 2006 DRG 20, 24, 25, 148, 154, 415, 416, and 475 for these DRGs the case severity rating equals CMS Version 23 numeric weights.

Source: SDAHO Dimensions Program January-December 2006; Iowa Hospital Association and 3M Medicare Grouper Version 23 & 24 (Federal Fiscal Year October 1 thru September 30).

**Wagner: Wagner Community Memorial Hospital**  
**Billing Contact: Business Office (605) 384-3611**  
**CY2006**



DRG	DRG Description	Case Severity			
		Rating	Discharges	Rank	Median Charge
89	Pneumonia, Adult, Complicated	1.0376	101	1	\$ 5,233.00
88	Chronic Obstructive Pulmonary Disease	0.8878	31	2	\$ 4,905.00
127	Heart Failure and Shock	1.049	30	3	\$ 5,807.50
90	Pneumonia, Adult, Uncomplicated	0.6148	26	4	\$ 4,419.00
277	Skin Infection, Adolescent, Complicated	0.8958	26	4	\$ 6,165.75
91	Pneumonia, Adolescent	0.5598	20	6	\$ 2,530.50
182	Digestive Disorders, Adult, Complicated	0.7853	20	6	\$ 4,983.35
320	Kidney and Urinary Tract Infections, Adult, Complicated	0.8769	20	6	\$ 5,289.00
278	Skin Infection, Adult, Uncomplicated	0.5649	16	9	\$ 5,276.70
296	Disorders related to Metabolism, Adult	0.8334	15	10	\$ 3,496.00
96	Bronchitis and Asthma, Adult, Complicated	0.735	13	11	\$ 3,921.00
294	Diabetes, Over Age 35	0.7869	12	12	\$ 3,060.00
183	Digestive Disorders, Adult, Uncomplicated	0.5841	10	13	\$ 2,904.50

Note: Hospitals are only required to report the top 25 DRGs with at least 10 cases reported. In 2006, only the above listed DRGs had at least 10 cases reported at this hospital. (ARSD 44:66:02:01).

Case Severity Rating equals CMS Version 24 numeric weights. The following DRG codes expired on October 1, 2006 DRG 20, 24, 25, 148, 154, 415, 416, and 475 for these DRGs the case severity rating equals CMS Version 23 numeric weights.

Source: SDAHO Dimensions Program January-December 2006; Iowa Hospital Association and 3M Medicare Grouper Version 23 & 24 (Federal Fiscal Year October 1 thru September 30).

**Watertown: Prairie Lakes Hospital**

[www.prairielakes.com](http://www.prairielakes.com)

**Billing Contact: Theresa Tesch (605) 882-6707**

**CY2006**



**Codington County**

<b>DRG</b>	<b>DRG Description</b>	<b>Case Severity</b>			
		<b>Rating</b>	<b>Discharges</b>	<b>Rank</b>	<b>Median Charge</b>
391	Normal Newborn	0.1564	527	1	\$ 1,998.00
373	Uncomplicated Vaginal Delivery	0.3911	445	2	\$ 3,940.00
544	Major Joint Replacement or Reattachment of Lower Extremity	1.9878	252	3	\$ 24,002.43
89	Pneumonia, Adult, Complicated	1.0376	194	4	\$ 9,100.50
359	Hysterectomy and Ovarian Procedures	0.8053	120	5	\$ 7,610.13
371	Uncomplicated Cesarean Section	0.6565	120	5	\$ 6,215.50
182	Digestive Disorders, Adult, Complicated	0.7853	91	7	\$ 5,945.00
127	Heart Failure and Shock	1.049	87	8	\$ 7,671.00
390	Newborn with Significant Problems	1.1551	84	9	\$ 7,050.00
88	Chronic Obstructive Pulmonary Disease	0.8878	64	10	\$ 8,601.50
174	Stomach and Intestinal Bleeding, Complicated	1.0296	60	11	\$ 7,906.00
210	Hip Operations except Replacement, Adult, Complicated	1.9022	60	11	\$ 13,900.48
296	Disorders related to Metabolism, Adult	0.8334	57	13	\$ 6,911.00
374	Normal Delivery with Tubal Ligation	0.6505	46	14	\$ 6,706.00
372	Vaginal Delivery, Complicated	0.566	43	15	\$ 4,122.00
14	Stroke	1.2118	41	16	\$ 8,244.00
148	Major Small and Large Bowel Procedures, Complicated	3.4479	40	17	\$ 22,634.11
320	Kidney and Urinary Tract Infections, Adult, Complicated	0.8769	40	17	\$ 6,907.50
204	Pancreatic Disorders, except Cancer	1.0989	33	19	\$ 6,561.00
277	Skin Infection, Adolescent, Complicated	0.8958	32	20	\$ 7,935.50
358	Hysterectomy and Ovarian Procedures, Complicated	1.1418	32	20	\$ 10,158.63
91	Pneumonia, Adolescent	0.5598	31	22	\$ 3,671.00
360	Vagina, Cervix and Vulva Procedures	0.8811	30	23	\$ 11,302.88
388	Premature Infant without Major Problems	1.917	29	24	\$ 2,425.00
139	Abnormal Heart Beat, Uncomplicated	0.5297	27	25	\$ 4,720.00
416	Infection of the Blood, Adult	1.6774	27	25	\$ 7,783.00

Note: Case Severity Rating equals CMS Version 24 numeric weights. The following DRG codes expired on October 1, 2006 DRG 20, 24, 25, 148, 154, 415, 416, and 475 for these DRGs the case severity rating equals CMS Version 23 numeric weights.

Source: SDAHO Dimensions Program January-December 2006; Iowa Hospital Association and 3M Medicare Grouper Version 23 & 24 (Federal Fiscal Year October 1 thru September 30).

**Webster: Lake Area Hospital**

[www.lakeareahospital.org](http://www.lakeareahospital.org)

**Billing Contact: Sheryl Papas, CFO (605) 345-3336**

**CY2006**



**Day County**

<b>DRG</b>	<b>DRG Description</b>	<b>Case Severity</b>			
		<b>Rating</b>	<b>Discharges</b>	<b>Rank</b>	<b>Median Charge</b>
462	Rehabilitation	0.946	29	1	\$ 5,817.67
89	Pneumonia, Adult, Complicated	1.0376	14	2	\$ 5,691.15
127	Heart Failure and Shock	1.049	12	3	\$ 5,264.27

Note: Hospitals are only required to report the top 25 DRGs with at least 10 cases reported. In 2006, only the above listed DRGs had at least 10 cases reported at this hospital. (ARSD 44:66:02:01).

Case Severity Rating equals CMS Version 24 numeric weights. The following DRG codes expired on October 1, 2006 DRG 20, 24, 25, 148, 154, 415, 416, and 475 for these DRGs the case severity rating equals CMS Version 23 numeric weights.

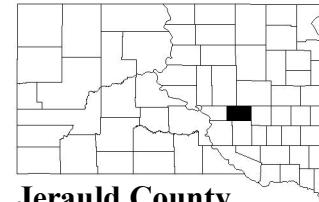
Source: SDAHO Dimensions Program January-December 2006; Iowa Hospital Association and 3M Medicare Grouper Version 23 & 24 (Federal Fiscal Year October 1 thru September 30).

**Wessington Springs: Avera Weskota Memorial Medical Center**

[www.averaweskota.org](http://www.averaweskota.org)

**Billing Contact: Linda Jager (605) 539-1201**

**CY2006**



**Jerauld County**

<b>DRG</b>	<b>DRG Description</b>	<b>Case Severity</b>			
		<b>Rating</b>	<b>Discharges</b>	<b>Rank</b>	<b>Median Charge</b>
127	Heart Failure and Shock	1.049	12	1	\$ 6,049.75
296	Disorders related to Metabolism, Adult	0.8334	12	1	\$ 5,542.00
89	Pneumonia, Adult, Complicated	1.0376	10	3	\$ 14,593.00

Note: Hospitals are only required to report the top 25 DRGs with at least 10 cases reported. In 2006, only the above listed DRGs had at least 10 cases reported at this hospital. (ARSD 44:66:02:01).

Case Severity Rating equals CMS Version 24 numeric weights. The following DRG codes expired on October 1, 2006 DRG 20, 24, 25, 148, 154, 415, 416, and 475 for these DRGs the case severity rating equals CMS Version 23 numeric weights.

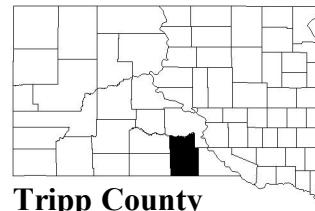
Source: SDAHO Dimensions Program January-December 2006; Iowa Hospital Association and 3M Medicare Grouper Version 23 & 24 (Federal Fiscal Year October 1 thru September 30).

**Winner: Winner Regional Healthcare Center**

[www.winnerregional.org](http://www.winnerregional.org)

**Billing Contact: Jim Frank (605) 842-7100**

**CY2006**



**Tripp County**

<b>DRG</b>	<b>DRG Description</b>	<b>Case Severity</b>			
		<b>Rating</b>	<b>Discharges</b>	<b>Rank</b>	<b>Median Charge</b>
391	Normal Newborn	0.1564	112	1	\$ 1,350.36
373	Uncomplicated Vaginal Delivery	0.3911	62	2	\$ 3,501.67
371	Uncomplicated Cesarean Section	0.6565	43	3	\$ 6,067.14
390	Newborn with Significant Problems	1.1551	27	4	\$ 1,567.00
372	Vaginal Delivery, Complicated	0.566	23	5	\$ 3,986.84
89	Pneumonia, Adult, Complicated	1.0376	22	6	\$ 4,976.86
88	Chronic Obstructive Pulmonary Disease	0.8878	19	7	\$ 5,287.10
127	Heart Failure and Shock	1.049	19	7	\$ 4,730.94
182	Digestive Disorders, Adult, Complicated	0.7853	19	7	\$ 3,301.22
183	Digestive Disorders, Adult, Uncomplicated	0.5841	14	10	\$ 2,735.81
91	Pneumonia, Adolescent	0.5598	12	11	\$ 3,049.24
14	Stroke	1.2118	11	12	\$ 6,147.75
320	Kidney and Urinary Tract Infections, Adult, Complicated	0.8769	11	12	\$ 3,647.32
370	Cesarean Delivery, Complicated	0.9002	11	12	\$ 7,211.14
374	Normal Delivery with Tubal Ligation	0.6505	11	12	\$ 6,971.30

Note: Hospitals are only required to report the top 25 DRGs with at least 10 cases reported. In 2006, only the above listed DRGs had at least 10 cases reported at this hospital. (ARSD 44:66:02:01).

Case Severity Rating equals CMS Version 24 numeric weights. The following DRG codes expired on October 1, 2006 DRG 20, 24, 25, 148, 154, 415, 416, and 475 for these DRGs the case severity rating equals CMS Version 23 numeric weights.

Source: SDAHO Dimensions Program January-December 2006; Iowa Hospital Association and 3M Medicare Grouper Version 23 & 24 (Federal Fiscal Year October 1 thru September 30).

**Yankton: Avera Sacred Heart Hospital**

[www.averasacredheart.com](http://www.averasacredheart.com)

**Billing Contact: Tim Schwasinger (605) 668-8103**

**CY2006**



**Yankton County**

<b>DRG</b>	<b>DRG Description</b>	<b>Case Severity</b>			
		<b>Rating</b>	<b>Discharges</b>	<b>Rank</b>	<b>Median Charge</b>
391	Normal Newborn	0.1564	501	1	\$ 2,412.30
373	Uncomplicated Vaginal Delivery	0.3911	397	2	\$ 4,822.25
182	Digestive Disorders, Adult, Complicated	0.7853	172	3	\$ 9,466.73
89	Pneumonia, Adult, Complicated	1.0376	169	4	\$ 11,892.50
544	Major Joint Replacement or Reattachment of Lower Extremity	1.9878	135	5	\$ 30,690.10
371	Uncomplicated Cesarean Section	0.6565	125	6	\$ 8,477.21
88	Chronic Obstructive Pulmonary Disease	0.8878	121	7	\$ 11,437.07
359	Hysterectomy and Ovarian Procedures	0.8053	108	8	\$ 13,170.21
127	Heart Failure and Shock	1.049	105	9	\$ 9,899.40
174	Stomach and Intestinal Bleeding, Complicated	1.0296	76	10	\$ 12,076.03
14	Stroke	1.2118	60	11	\$ 14,531.65
138	Abnormal Heart Beat, Complicated	0.8365	60	11	\$ 10,730.81
143	Chest Pain	0.5637	58	13	\$ 7,337.47
243	Medical Back Problems	0.797	48	14	\$ 10,710.46
183	Digestive Disorders, Adult, Uncomplicated	0.5841	47	15	\$ 8,870.62
210	Hip Operations except Replacement, Adult, Complicated	1.9022	47	15	\$ 25,211.95
79	Lung Infection, Complicated	1.6268	46	17	\$ 19,626.81
320	Kidney and Urinary Tract Infections, Adult, Complicated	0.8769	45	18	\$ 9,753.93
91	Pneumonia, Adolescent	0.5598	42	19	\$ 7,812.30
121	Circulatory Disorders with Heart Attack	1.6166	41	20	\$ 17,090.87
296	Disorders related to Metabolism, Adult	0.8334	37	21	\$ 9,329.40
388	Premature Infant without Major Problems	1.917	37	21	\$ 3,159.00
358	Hysterectomy and Ovarian Procedures, Complicated	1.1418	36	23	\$ 14,521.57
277	Skin Infection, Adolescent, Complicated	0.8958	35	24	\$ 10,325.34
390	Newborn with Significant Problems	1.1551	34	25	\$ 2,758.63
462	Rehabilitation	0.946	34	25	\$ 23,565.86

Note: Case Severity Rating equals CMS Version 24 numeric weights. The following DRG codes expired on October 1, 2006 DRG 20, 24, 25, 148, 154, 415, 416, and 475 for these DRGs the case severity rating equals CMS Version 23 numeric weights.

Source: SDAHO Dimensions Program January-December 2006; Iowa Hospital Association and 3M Medicare Grouper Version 23 & 24 (Federal Fiscal Year October 1 thru September 30).

**Yankton: Lewis and Clark Specialty Hospital**  
[www.lewisandclarkspecialty.com](http://www.lewisandclarkspecialty.com)

**Billing Contact: Terry Steichen, CFO**  
**CY2006**



<b>DRG</b>	<b>DRG Description</b>	<b>Case Severity</b>		<b>Discharges</b>	<b>Rank</b>	<b>Median Charge</b>
		<b>Rating</b>	<b>Rating</b>			
544	Major Joint Replacement or Reattachment of Lower Extremity	1.9878		87	1	\$ 29,743.43

Note: Hospitals are only required to report the top 25 DRGs with at least 10 cases reported. In 2006, only the above listed DRGs had at least 10 cases reported at this hospital. (ARSD 44:66:02:01).

Case Severity Rating equals CMS Version 24 numeric weights. The following DRG codes expired on October 1, 2006 DRG 20, 24, 25, 148, 154, 415, 416, and 475 for these DRGs the case severity rating equals CMS Version 23 numeric weights.

Source: SDAHO Dimensions Program January-December 2006; Iowa Hospital Association and 3M Medicare Grouper Version 23 & 24 (Federal Fiscal Year October 1 thru September 30).

**Yankton: SD Human Services Center**

[www.state.sd.us/dhs/mcn/index.htm](http://www.state.sd.us/dhs/mcn/index.htm)

**Billing Contact: David Geise (605) 668-3108**

**CY2006**



Hospitals not utilizing DRGs are exempt from reporting requirements. In 2005, this hospital did not utilize DRGs. (ARSD  
44:66:02:01)